



# SCHNEIDER LABORATORIES GLOBAL, INC.

2512 West Cary Street, Richmond, Virginia 23220-5117  
804-353-6778 • 800-785-LABS (5227) • Fax 804-359-1475  
www.slabinc.com • info@slabinc.com

X 10

473055

V:4731473055

thanks  
UPS

5/11/2022 9:47:45 AM  
1Z2E28999068005489

Submitting Co.	The El Group, Inc.	State of Collection	NC	Cert. Required	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
2101 Gateway Centre Blvd. Ste 200		Acct #		Phone	919-459-5291
Morrisville, NC 27560		Email			
Project Name	Dewberry APP- 10101	PO #			
Project Location	1908 E. 5TH ST	Special Instructions:			
Project Number	IHMO220083.00	cc to: fsimoni@ei1.com			
Collected By	F. Simoni				

Turn Around Time**	Matrix	Tests/Analytes (Select ALL that Apply) Blank spaces are for additional analytes			
<input type="checkbox"/> 2 Hour* <input type="checkbox"/> Same day* <input type="checkbox"/> 1 business day <input checked="" type="checkbox"/> 2 business days <input type="checkbox"/> 3 business days <input type="checkbox"/> 5 business days <small>* not available for all tests</small> <small>** just 5 PM the TAT will begin next business day</small> <small>Please schedule rush tests in advance</small>	<input type="checkbox"/> Air <input type="checkbox"/> Paint <input checked="" type="checkbox"/> Soil <input checked="" type="checkbox"/> Wipe <input type="checkbox"/> Bulk <input type="checkbox"/> Waste Water <input type="checkbox"/> Ground Water <input type="checkbox"/> Drinking Water <input type="checkbox"/> TSP / PM10 <input type="checkbox"/>	<b>Asbestos in Bulk</b> <input type="checkbox"/> PLM <input type="checkbox"/> PLM Qualitative <input type="checkbox"/> 400 Point Count <input type="checkbox"/> 1000 Point Count <input type="checkbox"/> Gravimetric Prep <b>Asbestos in Air</b> <input type="checkbox"/> PCM <input type="checkbox"/> PCM-B Rules	<b>Metals Total</b> <input checked="" type="checkbox"/> Lead <input type="checkbox"/> RCRA 8 Metals <input type="checkbox"/> Chromium VI <input type="checkbox"/> Mercury <b>Gravimetric</b> <input type="checkbox"/> Total Dust NIOSH 0500 <input type="checkbox"/> Resp. Dust NIOSH 0600	<b>TCLP</b> <input type="checkbox"/> Lead <input type="checkbox"/> RCRA 8 Metals <input type="checkbox"/> Full TCLP (w/ organics 10 Day) <b>Miscellaneous</b> <input type="checkbox"/> Silica FTIR (7602) <input type="checkbox"/>	<b>Microbiology</b> <input type="checkbox"/> BACT (MPN/PA) <input type="checkbox"/> Mold Direct Exam <input type="checkbox"/> Allergens <b>Sub-Contract</b> <input type="checkbox"/> TEM Chatfield <input type="checkbox"/> TEM AHERA <input type="checkbox"/> TEM 7402 <input type="checkbox"/> Silica XRD (7500)

Sample #	Date Sampled	Time Sampled	Sample Identification (Employee, Bldg./Material, Type <sup>1</sup> )	Wipe Area	Time <sup>2</sup> Start	Time <sup>2</sup> Stop	Flow Rate <sup>3</sup> Start	Flow Rate <sup>3</sup> Stop	Total Air <sup>4</sup>
1	5/5/22		LIVING ROOM - FL	147	N/A	N/A	N/A	N/A	N/A
2			↓ - W. SILL	36					
3			BED 2 - Floor	144					
4			↓ - W. SILL	36					
5			BATH - Floor	144					
6			KITCHEN - Floor	144					
7			BED 2 - Floor	144					
8			LIVING ROOM - SILL	36					
9			SILL	N/A					
B			QC	N/A					

For Aqueous and Solid samples ensure enough sample is sent for duplicate and spike analysis

Type: Ambient, Bulk, Personal, Excursion    <sup>1</sup>Beginning/End of Sample Period    <sup>2</sup>Liters/Minute    <sup>3</sup>Volume in Liters (Time in min x flow in L/min)

Relinquished By: F. Simoni

Signature:

Date/Time: 5/5/22

! ALL SHADED FIELDS MUST BE FILLED TO AVOID DELAYS !