

How to take Samples for Asbestos Analysis

Taking samples yourself is not recommended. If you nevertheless choose to take the samples yourself, take care not to release asbestos fibers into the air or onto yourself. Material that is in good condition and will not be disturbed (by remodeling, for example) should be left alone. Only material that is damaged or will be disturbed should be sampled. Anyone who samples asbestos-containing materials should have as much information as possible on the handling of asbestos before sampling, and at a minimum, should observe the following procedures:

- Make sure no one else is in the room when sampling is done.
- Wear disposable gloves or wash hands after sampling.
- Shut down any heating or cooling systems to minimize the spread of any released fibers.
- Do not disturb the material any more than is needed to take a small sample.
- Place a plastic sheet on the floor below the area to be sampled.
- Wet the material using a fine mist of water containing a few drops of detergent before taking the sample. The water/detergent mist will reduce the release of asbestos fibers.
- Carefully cut a piece from the entire depth of the material using, for example, a small knife, corer, or other sharp object. Place the small piece into a clean container (for example, a 35 mm film canister, small glass or plastic vial, or high quality resealable plastic bag).
- Tightly seal the container after the sample is in it.
- Carefully dispose of the plastic sheet. Use a damp paper towel to clean up any material on the outside of the container or around the area sampled. Dispose of asbestos materials according to state and local procedures.
- Label the container with an identification number and clearly state when and where the sample was taken.
- Patch the sampled area with the smallest possible piece of duct tape to prevent fiber release.

(The above information is from the EPA website.)

(Please fill out information below **COMPLETELY** and include with samples & payment-**unless prepaid**)

Property Street Address: _____

City/State: _____ Zip: _____ Date/Time Sampled: _____

Area Sampled (kitchen, living room, attic, etc.) _____

Name of person sampling: _____ Company/Agency: _____ Phone#: _____

Mail Report To: _____

Fax #: _____ OR Email: _____

PAYMENT INFORMATION—(IF NOT PREPAID)

Please enclose your payment of \$__per sample X __ samples = Total of \$ _____

(If more than 5 samples, call for volume pricing.)

Form of payment: check: # or money order#: _____ credit card __call with card information: 804-742-5577

Customer Account: _____ (Please make checks payable to: Mid-Atlantic Laboratories, Inc.)

You may **deliver** / or **ship by UPS/Fedex** your samples directly to **Mid-Atlantic Laboratories, Inc.** at:

224 Main St., Ste. 1, Port Royal, VA 22535

OR...you may **mail your samples by US Mail** to:

Phone: 804-742-5577

14294 Big Timber Rd., King George, VA 22485

LAB USE ONLY

Payment received from: _____ Date Pd.: _____ Amt. _____ # Samples: __ By: _____

Check/Money Order # _____ Credit Card _____

Customer Account: _____ Date/Time Samples Received: _____ By: _____ Lab Project #: _____