

LEAD SAFETY for Remodeling, Repair and Painting

Paint Chip Sample Collection Form

Page ___ of ___

Renovation Address: _____	Unit #: _____	
City: _____	State: _____	Zip code: _____

For each sample collected, fill out all of the following information

Sample Identifier: _____

Sample Collector Name: _____

Sampling Location: _____

Sampling site description: _____ Date of Collection: ___/___/___

Sample Dimensions (cm): _____ Calculate Sample Area (cm²): _____

NLLAP-recognized entity and location: _____

Submission date: ___/___/___ Results: _____ Result Date: ___/___/___

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