



ANALYTICAL REPORT

Client's Name:

NYC Department of Health and Mental Hygiene

Project Address: 514 East 12 st

Child Id: N/A

LASU #: L2021-0894

Lab ID: LW11211012

Date of Report: 11/19/2021

Atlas Environmental Lab, Corp.

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ANALYSIS OF REPORT FOR LEAD IN DUST WIPES

Client: Healthy Homes Program
Collected by: Client
Technician: RL
Child ID: N/A
LASU #: L2021-0894
Address: 514 East 12 St
Apt/Boro: CMN / 1

Lab ID: LW11211012
Date Sampled: 11/9/2021
Date Received: 11/17/2021
Date Analyzed: 11/19/2021
Report Date: 11/19/2021

Client ID #	Lab ID #	Location/Description	Area Sampled (Inches)	Lead (µg/ft²)
110921-2333-001	LW11211012-1	5th Floor Public Hallway from Roof Shingles - Floor - Vinyl - No Window	12x12	<5
110921-2333-002	LW11211012-2	Stairs from 5th to 4th Floor Public Hallway - Tread - Vinyl - No 1/2 Landing	34x9	8
110921-2333-003	LW11211012-3	Blank	N/A	<5 (µg/Wipe)

TC

Analysis Method: EPA 7000B
RL (Reporting limit): 5.0 µg/ft² (based upon 1.0 square foot samples)
NYS - ELAP#11999, AIHA-LAP, LLC ID: 208306, CT Reg. # PH-0154

Exysis Method: EPA 7000
Prep Method: EPA 3050B

Analyst: RI

Approved by:

USEPA requirement to meet ASTM E1792 Specification for ghost wipes; Collection procedure, protocols and sample locations are based on information provided by the client submitting the samples; and as such, Atlas Environmental Labs disclaims any knowledge of and liability for the accuracy and completeness of this information. The results related only to the items tested. Lead results are not corrected for blank.

W11211012

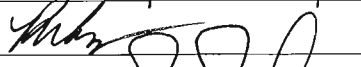
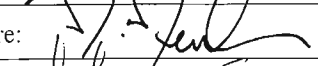
HEALTHY HOMES PROGRAM

125 Worth Street 6th Floor, CN # 58, New York, NY 10013, (646) 632-6002, Fax (347) 396-8926

Field Sampling and Chain of Custody Form for Environmental Sampling

Page 1 of 1

Child ID #:		<input type="checkbox"/> Case <input checked="" type="checkbox"/> Complaint		Job Number (XRF):		<input type="checkbox"/> Check here if no XRF readings were taken in or outside the apartment
Sampling Address: 514 East 12 St		Apt.: CMN		Boro: 1	Health Area: 14-6200	
Name of Property Owner:						
Owner Address:		Boro:		LASU #: L2021-0894		
Sample ID # Date (Month/Day/Year) - Employee ID - Sample ID (3 digits) e.g. 041804-1234-001	Room Name (Must match XRF room name)	Component	Sample Area (Length x Width in inches)	Comments Note special sample conditions, locations, and sample type. For example: Conditions: carpeted floor; bare soil Location: window on left on Wall 1; back yard Type: dust, soil, paint chip, water		
110921-2333-001	5 th Floor Public Hallway From Roof Stairs	<input checked="" type="checkbox"/> Floor <input type="checkbox"/> Window Sill <input type="checkbox"/> Other:	12 x 12	<input checked="" type="checkbox"/> No Window <input type="checkbox"/> No 1/2 Landing Viny 1 EJ		
110921-2333-002	Stairs From 5 th to 4 th Floor Public Hallway	<input type="checkbox"/> Floor <input type="checkbox"/> Window Sill <input checked="" type="checkbox"/> Other: Tread	34 x 9	<input type="checkbox"/> No Window <input checked="" type="checkbox"/> No 1/2 Landing Viny 1 8		
110921-2333-003	BLANK	<input type="checkbox"/> Floor <input type="checkbox"/> Window Sill <input type="checkbox"/> Other:	-	<input type="checkbox"/> No Window <input type="checkbox"/> No 1/2 Landing - CJ		
-		<input type="checkbox"/> Floor <input type="checkbox"/> Window Sill <input type="checkbox"/> Other:		<input type="checkbox"/> No Window <input type="checkbox"/> No 1/2 Landing		
-		<input type="checkbox"/> Floor <input type="checkbox"/> Window Sill <input type="checkbox"/> Other:		<input type="checkbox"/> No Window <input type="checkbox"/> No 1/2 Landing		

Collected by PHS (Print): Raymond Ly		Batch #:	
PHS Signature: 	Badge #: 001	ID #: 2333	Date Collected: 11/09/21
Associate PHS I Signature: 	Reason for Transfer: Lead content analysis		Date Transferred: 11/16/21
Transferred to: Melaine Ferry	Reason for Transfer:		Date Transferred: 11/17/21 12:40pm
Transferred to:	Reason for Transfer:		Date Transferred:

Note for Laboratory: Unless specified otherwise, dust wipes and paint chip results should be sent to HHP within 24 hours and soil and water results should be sent to HHP within 48 hours.
Dust sample Reporting Limit (RL): 5.0 µg/ft²

RI 11/19/21



New York
December 2, 2021 at 9:24 AM



New York
December 2, 2021 at 10:33 AM

