

GOVERNMENT OF THE DISTRICT OF COLUMBIA  
Department of Energy and Environment

Lead-Safe and Healthy Housing Division  
Lead Compliance and Enforcement Branch

**NOTICE OF DUST SAMPLING FORM**  
20 DCMR §§ 3315.7, 3316.10(d), or 3318.7(c)

Complete one form per property address

Property Address: \_\_\_\_\_

Quadrant (SE/SW/NW/NE): \_\_\_\_\_ Ward: \_\_\_\_\_

Unit(s) That Will be Tested \_\_\_\_\_

Building Type (Residential or Child-Occupied Facility): \_\_\_\_\_

Year Built: \_\_\_\_\_

Owner or Administrator Name: \_\_\_\_\_

Name of Dust Sampling Professional: \_\_\_\_\_

Dust Sampling Professional Telephone Number: \_\_\_\_\_

Certification Type: \_\_\_\_\_

Certification Number: \_\_\_\_\_

Certification Expiration Date: \_\_\_\_\_

Date of Dust Sampling: \_\_\_\_\_

Time of Dust Sampling: \_\_\_\_\_

**Dust Sampling Professional Acknowledgement**

In keeping with the obligations under the Lead-Hazard Prevention and Elimination Act of 2008, as amended (DC Law 17-381; D.C. Official Code § 8-231.01 *et seq*), I am completing and forwarding this Form to notify the Department of Energy and Environment that I will be conducting lead dust sampling at the above property at the stated date and time. I will immediately notify DOEE with an amended form.

**Please submit to:**

**DEPARTMENT OF ENERGY AND ENVIRONMENT  
LEAD-SAFE AND HEALTHY HOUSING DIVISION / LEAD COMPLIANCE & ENFORCEMENT BRANCH  
1200 FIRST STREET, N.E., 5th Floor / WASHINGTON, D.C. 20002  
Fax: 202-481-3770**

\_\_\_\_\_  
Dust Sampling Professional Signature

\_\_\_\_\_  
Date

