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