Volatile Organic Compounds Level Certification Form for the Qualified Environmental Professional Who Conducted Testing

Pursuant to New York City Building Code § U202.09 and New York City Department of Health and Mental Hygiene Rules §§ 40-05 and 40-06, I hereby certify that:

1. On _____ (DATE), I conducted air sampling of the below-referenced apartment ("unit") using the TO-15A method required by NYC Department of Health and Mental Hygiene ("Department") Rule § 40-03(b).

_____
Street Address of Unit Tested with Unit Number (if any)

_____
Borough of Unit Tested ZIP Code of Unit Tested

_____
NYC DOB Alt-CO Job Number NYC DOB ATR Initial Number *(where applicable)*

2. At the time of the testing I was a qualified environmental professional as defined by Department Rule § 40-02. I am licensed in _____ (STATE) and my license number is _____.
   Please attach copies of license(s) to this certification.

3. On _____ (DATE) I sent the sample(s) for analysis to the laboratory noted below certified for analysis by the New York State Environmental Laboratory Approval Program ("ELAP").

_____
Name of Laboratory Conducting Analysis ELAP ID Number

4. The ELAP laboratory report of the samples I collected indicates that the unit's indoor air levels are lower than the limits set by Department Rule § 40-05 (24 RCNY 40-05) for 20 volatile organic compounds. The date of the report was _____ (DATE).

I hereby affirm, under penalty of perjury, that the information provided on this form is true and correct to the best of my knowledge and belief and complies with the provisions of any applicable laws or rules. I recognize that false statements are misdemeanors pursuant to Section 210.45 of the New York Penal Law and are punishable by a fine or imprisonment or both.

Signature	Date
Name (Printed)	Phone Number
Name of Company	Email Address
Address	

Please affix professional geologist or engineer seal, as appropriate, here.