

AFFIDAVIT BY DUST WIPE SAMPLER

I, (**print name**), performed the sampling for lead based-paint dust hazard clearance at the premises located at (**address**) (**apartment number**) on (**date**).

I confirm that I am not related to and am independent of the owner of the multiple dwelling and any individual or firm that performed the work that disturbed or abated lead-based paint. I performed the sampling in accordance with 40 CFR 745.227 and with 28 RCNY §11-06.

I have attached a copy of my EPA Certification issued under 40 CFR 745.226, either as Lead Inspector / Risk Assessor or my 6-month Interim Certification under 40 CFR 745.225 from an EPA accredited school, to this affidavit. My EPA-certification number is and it expires on .

I have also attached to this affidavit a copy of the EPA certification of my firm (**firm name**): .

(Print Name)

(Signature)

* State of , County of

Notary Stamp

Sworn to before me this day of , 20

(Notary Print Name)

(Notary Signature)