NEW YORK CITY DEPARTMENT OF EDUCATION
DIVISION OF SCHOOL FACILITIES
OFFICE OF BUILDING SERVICES

BUILDING MATERIAL DATA FORM

PROJECT INFORMATION

School:	Project Name:	Project No.:
Date:	Supervisor:	Reviewer:

Material	Material Location		Disturbance Type			AHERA			Other Records			Painted		Color	LBP			Comments
							ACM		Indicate	ACM								
	Floor	Room	Direct	Indirect	Potential	Space ID	Yes	No	Record	Yes	No	Yes	No		Yes	No	Assumed	