



Date: (Date Prepared)

To: (Employees Names/Job Titles)

Subject: Exposure Assessment Results – Above Permissible Exposure Limit (PEL)

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A respirable crystalline silica exposure assessment was conducted on: show date (s).

Performing the assessment were: Name/Job Title of Each Person.

Results from this assessment were: (show results obtained from the laboratory)

(Add or remove sample numbers as needed to show total sampling performed)

Sample 1: \_\_\_\_\_

Sample 2: \_\_\_\_\_

Sample 3: \_\_\_\_\_

Sample 4: \_\_\_\_\_

Sample 5: \_\_\_\_\_

Corrective Action Taken to Reduce Employee Exposure Below the PEL:

(Add or remove lines depending on the number implemented)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

\_\_\_\_\_  
(Signature – Manager/Supervisor)

\_\_\_\_\_  
(Department/Job Title – Manager/Supervisor)