



N95 Respirator Fit Testing

I, _____, have read and understand the instructions for the N95 Respirator.

I have received a data sheet of instructions outlining the intended use, contradictions, and restrictions of the N95 Respirator.

I agree to follow these instructions each time I use the respirator. I understand the respirator will not provide adequate protection when used under conditions for which it has not been designated.

This fit test procedure was conducted in compliance with OSHA fit testing requirements (29CFR 1910.134 Appendix A).

Respirator Type: N95 Particulate

Manufacturer/Model: MOLDEX N95 1513

Testing Device: FT-30 Qualitative Fit Test Apparatus

Mask Size: X-Small Small Medium Large Low-Profile

Results: Pass Fail

Employee Name: _____

Employee Signature: _____

Testing Date: _____

Tester Signature: _____