Minnesota Department of Health
Indoor Air Unit
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Log of Air Quality Testing

INDOOR MOTORSPORTS- SPECIAL EVENTS

Event Name: _____

Arena Name: _____

Time Period of Log: _____ **Signature**: _____

Are performers paid? _____ **Test location on track**: _____

Test location in spectator area: _____

- If CO is higher than 30 ppm for more than 15 minutes, **increase ventilation**.
- If CO is higher than 30 ppm for more than 1 hour, **suspend motor vehicle use**.

Date	Time	Location	Reading CO (ppm)	Date	Time	Location	Reading CO (ppm)