

**DOCUMENT REVIEW FORM FOR  
AIR QUALITY CRITERIA FOR PARTICULATE MATTER  
Fourth External Review Draft**

**Chapter Number** \_\_\_\_\_ **Chapter Title** \_\_\_\_\_

**Reviewer** \_\_\_\_\_ **Organization** \_\_\_\_\_

**Address** \_\_\_\_\_

**Recommendations:**  Acceptable as is<sup>3</sup>  Acceptable only after major revision<sup>1</sup>  
 Acceptable after minor revision<sup>2</sup>  Not acceptable<sup>0</sup>

*Note: If either of the two choices at above right are checked, please state specific reasons in the comments section below.*

<b>Summary Rating</b>	<b>Scientific Accuracy</b>	<b>Scientific Relevance</b>	<b>Regulatory Relevance</b>	<b>Literature Cited</b>	<b>Emphasis</b>	<b>Coverage</b>	<b>Writing</b>
Excellent <sup>3</sup>							
Good <sup>2</sup>							
Fair <sup>1</sup>							
Poor <sup>0</sup>							

**Reviewer's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Return To:** Project Manager for Particulate Matter, National Center for Environmental Assessment (B243-01), U.S. Environmental Protection Agency, Research Triangle Park, NC 27711

**General Comments** (Attach extra pages if needed, but please be concise.)

**Specific Comments** (Indicate page, line, table, and figure numbers for each comment; attach extra pages as needed.)