

## STATUS OF COMPLIANCE WITH LEAD-BASED PAINT REGULATIONS

To be submitted with project set-up, contract, and work-write-up.

Project Name and Address: \_\_\_\_\_  
\_\_\_\_\_

**1. Check applicable box(es)**

- |  |  |
|--|--|
| <input type="checkbox"/> Post 1977 Housing           | <input type="checkbox"/> Lead Hazard Screening |
| <input type="checkbox"/> Lead based paint inspection | <input type="checkbox"/> Risk Assessment       |

**2. If inspection/risk assessment performed:**

Name of Inspector/Risk Assessor \_\_\_\_\_  
Organization \_\_\_\_\_

**3. Were Lead Based Paint Hazards found?**

- Yes  No

**4. If yes, were corrective measures added to the work-write-up?**

- Yes  No

**5. Type of Lead-based Paint Hazard Reduction Activity:**

- |  |   |
|--|---|
| <input type="checkbox"/> Standard treatments | <input type="checkbox"/> Interim controls |
| <input type="checkbox"/> Abatement           | <input type="checkbox"/> None             |

**6. Is relocation necessary?**

- Yes  No

**7. Did homeowner receive a copy of the Risk Assessment or Presumption of Lead?**

- Yes  No

**8. Copy of Risk Assessment attached?**

- Yes  No  N/A Copy already submitted

Administrator: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_