Appendix 8
Example of a Risk Assessment Report

This Appendix provides examples of lead-based paint risk assessment reports in two types of settings: a single-family rental dwelling operated by a small-scale owner (Appendix 8.1) and a large multi-family housing development with many similar dwelling units (Appendix 8.2).
Appendix 8.1

Example of a Risk Assessment Report for a Single-Family Dwelling
Operated by a Small-Scale Owner

(See Appendix 8.2 for a Multifamily Risk Assessment.)

Part I: Identifying Information:

**Lead-Based Paint Risk Assessment Report**

For The Dwelling Located at:

1234 Main St.
Anywhere, Any State 300000

Prepared For:

Mr. Joseph H. Smith, Owner
4444 Podunck Way
Anywhere, Any State 300000
400-777-7777

By:

Michael L. Hazard, Certified Assessor
5678 Snowflake St.
Anywhere, Any State 300000
400-333-3333

Any State License No. 94-567

April 19, 1994
Summary

Part I: Identifying Information

Identity of dwelling(s) covered by report, identity of property(ies).
1. Risk Assessor, Name of Certificate (or License) and Number and State issuing certificate/license.
2. Property Owner Name, Address, and Phone Number.
3. Date of Report, Date of Environmental Sampling.

Part II: Completed Management, Maintenance, and Environmental Results Forms and Analyses

4. List of Location and Type of Identified Lead Hazards including an indication of which hazards are priorities (this summary should be suitable for use as notification to residents).
5. Optional Management Information (Form 5.6) (not required for homeowners).
6. Maintenance/Paint Condition Information (Form 5.2 or 5.7).
7. Building Condition (Form 5.1).
8. Brief Narrative Description of Dwelling Selection Process (not required if all dwellings were sampled).
10. Deteriorated Paint Sampling Results (Form 5.3 or 5.3a).
11. Dust Sampling Results (Form 5.4 or 5.4a).
12. Soil Sampling Results (Form 5.5).
13. Other Sampling Results (if applicable).

Part III: Lead Hazard Control Plan

14. Lead-Based Paint Policy Statement (not applicable for homeowners).
15. Name of Individual in Charge of Lead-Based Paint Hazard Control Program.
16. Recommended Changes to Work Order System and Property Management (optional, not applicable for homeowners or property owners without work order systems).
17. Acceptable Interim Control Options For This Property and Estimated Costs.
18. Acceptable Abatement Options For This Property and Estimated Costs.
19. Reevaluation Schedule (if applicable).
20. Interim Control/Abatement to Be Implemented in This Property.
21. A Training Plan for Managers, Maintenance Supervisors, and Workers (this should include named individuals), if applicable.
22. Method of Resident Notification of Results of Risk Assessment and Lead Hazard Control Program (not applicable for homeowners). Note: This section should include a discussion of how residents are to be educated about lead poisoning, before the risk assessment results are released.
23. Signatures (Risk Assessor) and Date.

Part IV: Appendix

24. All laboratory raw data.
Part I: Identifying Information

A lead-based paint risk assessment was conducted at 1234 Main St. in Anywhere, Any State 300000 for Mr. Joseph H. Smith, Owner, who is located at 4444 Podunck Way, Anywhere, Any State 300000 (400-777-7777) on April 1, 1994. The risk assessment was conducted by Michael L. Hazard, a Certified Risk Assessor (Any State License No. 94-567).

Part II: Results

4. List of Location and Type of Identified Lead Hazards

While the building and its paint are in reasonably good condition overall, the risk assessment showed that lead-based paint hazards (as defined in Title X of the 1992 Housing and Community Development Act) exist in the following locations:

a. Deteriorated lead-based paint on the exterior side of the windows.

b. Leaded dust on the floor of Bobby’s bedroom (the southeast bedroom on the second floor).

c. Deteriorated lead-based paint on the interior door leading to Bobby’s bedroom (the southeast bedroom)

A few other painted surfaces that have not been tested for lead are in "fair" condition and should be repainted within the next year before further deterioration occurs. However, these surfaces are not considered to be immediate "hazards," using criteria in the 1995 HUD Guidelines for the Evaluation and Control of Lead-Based Paint Hazards in Housing. Those surfaces are:

- Exterior Doors
- Exterior Railings
- All Interior Doors (except the bedroom door to the southeast bedroom, which is in poor condition and requires repair immediately)
- Interior window trim
- Stairways
- Bathroom cabinets

Since vacancies occur frequently in this property, these surfaces can be repainted at that time. Before any scraping or sanding, the paint should be tested to see if it contains lead. The paint on the porch floor is in poor condition, but since it does not contain lead-based paint, it does not require priority attention.

There has not been any previous lead-based paint testing at this dwelling, although a lead-based paint inspection of all painted surfaces is recommended so that potential lead problems can monitored before they become hazardous. Soil lead levels were all below 400 µg/g. Current EPA and HUD Guidance for soil is 400 µg/g for bare play areas and 2,000 µg/g for other areas. Using these criteria, soil is not a hazard at this property.
The owner has decided to select the following hazard control measures, which are all acceptable based on HUD’s *Guidelines for the Evaluation and Control of Lead-Based Paint Hazards in Housing*:

- stabilize the paint on the exterior of all the windows
- remove the lead dust located in the child’s bedroom
- replace the door leading to the southeast second floor bedroom

Mr. Smith has chosen to use interim controls for the windows until 1997, when the State of Any State is likely to begin a special loan fund for financing lead-based paint abatement that should make window replacement financially possible. Mr. Smith will also make sure that the part-time as-needed maintenance worker he uses will be trained. Certain property management practices will be adopted to ensure that the normal repair work done will not disturb those surfaces with lead-based paint.

After the cleaning and paint film stabilization work has been completed, clearance dust samples must be taken to make certain that the dwelling is lead-safe before the family moves back in to the room.

**Reevaluation:** Standard Reevaluation Schedule 3 contained in the HUD Guidelines applies to this property, since one of the rooms had a dust lead level greater than the standard. Therefore, the dwelling should be reevaluated in April 1995 (12 months from now). If no lead-based paint hazards are identified at that time, another reevaluation should be conducted in April 1997 (2 years later). If no lead-based paint hazards are identified at that time, no further reevaluations are needed. However, since lead-based paint may be present in the dwelling, the owner should monitor the condition of all painted surfaces at least annually or whenever other information indicates a potential problem.

Mr. Smith has agreed to share the results of this report with the Jones family, which now occupies the residence and to provide the family with the EPA brochure and a brochure from the Anywhere Childhood Lead Poisoning Prevention program as a way of educating the residents.
Form 5.0
Resident Questionnaire

Children/Children’s Habits

1. (a) Do you have any children that live in your home? Yes ___X___ No _____
   (b) If yes, how many? __2___ Ages? __1__ __3___ _____ _____ _____
   (c) Record blood lead levels, if known_____ _____ _____ _____ _____

IF NO CHILDREN, SKIP TO Q.5

2. Locate the rooms/areas where each child sleeps, eats, and plays.

<table>
<thead>
<tr>
<th>Name of Child</th>
<th>Location of Bedroom</th>
<th>Location of All Rooms Where Child Eats</th>
<th>Primary Location Where Child Plays Indoors</th>
<th>Primary Location Where Child Plays Outdoors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bobby</td>
<td>Southeast - Second Floor</td>
<td>Kitchen</td>
<td>Living Room</td>
<td>Back Yard Under Jungle Gym</td>
</tr>
<tr>
<td>Jennifer</td>
<td>Southwest - Second Floor</td>
<td>Kitchen</td>
<td>Living Room</td>
<td>Back Yard Under Jungle Gym</td>
</tr>
</tbody>
</table>

3. Where are toys stored/kept? _____ Living Room

4. Is there any visible evidence of chewed or peeling paint on the woodwork, furniture, or toys? Yes _____ No ___X___

Family Use Patterns

5. Which entrances are used most frequently? ___ Front Door

6. Which windows are opened most frequently? ___ Living Room

7. Do you use window air conditioners? If yes, where? _____ No ___X___
   (Condensation often causes paint deterioration)

8. (a) Do any household members engage in gardening? Yes _____ No ___X___
   (b) Record the location of any vegetable garden. ___ No garden
   (c) Are you planning any landscaping activities that will remove grass or ground covering? Yes _____ No ___X___

9. (a) How often is the household cleaned? once/week
   (b) What cleaning methods do you use? mopping and sweeping

10. (a) Did you recently complete any building renovations? Yes _____ No ___X___
    (b) If yes, where?
    (c) Was building debris stored in the yard? If Yes, Where?

11. Are you planning any building renovations? Where? _____ No ___X___

12. (a) Do any household members work in a lead-related industry? Yes _____ No ___X___
    (b) If yes, where are dirty work clothes placed and cleaned?
Part 1: Identifying Information

Identifying Information:

Name of Building or Development Not Applicable
Number of Buildings ____1____
Number of Individual Dwelling Units/Building: ____1___
Number of Total Dwelling Units: ___1____
Date of Construction 1937 (If between 1960 - 1978, consider a Screen Risk Assessment)
Date of Substantial Rehab, if any None

List of Addresses of Dwellings (attach list if more than 10 dwellings are present)

<table>
<thead>
<tr>
<th>Dwelling No.</th>
<th>Address</th>
<th>No. Children Aged 0 - 6 Years Old</th>
<th>Recent Code Violation Reported by Owner?</th>
<th>Chronic Maintenance Problem?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1234 Main St. Anywhere, Any State</td>
<td>2</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
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<td></td>
</tr>
</tbody>
</table>

Record number and locations of common child play areas (on-site playground, backyards, etc.)

Number 1 Play Structure In Back Yard
Part 2: Management Information

1. List names of individuals who have responsibility for lead-based paint. Include owner, property manager (if applicable), maintenance supervisor and staff (if applicable) and others. Include any training in lead hazard control work (inspector, supervisor, worker, etc.) that has been completed. Use additional pages, if necessary.

   This information will be needed to devise the risk management plan contained in the risk assessor’s report.

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Training Completed (if none, enter &quot;None&quot;)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joseph Smith</td>
<td>Owner</td>
<td>None</td>
</tr>
<tr>
<td>Not Applicable</td>
<td>Property Manager</td>
<td></td>
</tr>
<tr>
<td>Joe Sweat</td>
<td>Maintenance Worker</td>
<td>None</td>
</tr>
</tbody>
</table>

2. Has there been previous lead-based paint evaluations?
   _____ Yes  ___X___ No (If yes, attach the report)

3. Has there been previous lead hazard control activity?
   _____ Yes  ___X___ No (If yes, attach the report)

4. Maintenance usually conducted at time of dwelling turnover:
   Repainting:______Where needed______
   Cleaning:_______Where needed________
   Repair: ______Where needed________

5. Employee and Worker Safety Plan
   a. Is there an occupational safety and health plan for maintenance workers?
      _____ Yes  ___X___ No (If yes, attach plan)

   b. Are workers trained in lead hazard recognition?
      _____ Yes  ___X___ No  If yes, who performed the training?

   c. Are workers involved in a hazard communication program?
      _____ Yes  ___X___ No

   d. Are workers trained in proper use of respirators?
      _____ Yes  ___X___ No
e. Is there a medical surveillance program
   ______ Yes ___X___ No

6. Is there a HEPA Vacuum available?
   ______ Yes ___X___ No

7. Are there any on-site licensed or unlicensed day-care facilities.
   ______ Yes ___X___ No  If yes, give location ________________________________

8. Planning for Resident Children with Elevated Blood Levels
   a. Who would respond for the owner if a resident children with an elevated blood lead level was identified?
      The owner
   b. Is there a plan to relocate such children?
      ______ Yes ___X___ No  If Yes, Where? ________________________________
   c. Do you (the owner) know if there ever has been a resident child with an elevated blood lead level?
      ______ Yes ______ No ___X___ Unknown

9. Owner Inspections
   a. Are there periodic inspections of all dwellings by the owner?
      ___X___ Yes ______ No  If Yes, how often? Every year or whenever the unit is vacant
   b. Is the paint condition assessed during these inspections?
      ___X___ Yes ______ No

11. Have any of the dwellings have ever received a housing code violation notice?
    ______ Yes ___X___ No ______ Unknown  If yes, describe code violation
        ______________________________________________________________

12. If previously detected, unabated lead-based paint exists in the dwelling, have the residents been informed?
    ______ Yes ______ No ___X___ Not Applicable
Form 5.7
Maintenance Data for Rental Dwellings

Recorded during onsite investigation

1. Condition of Paint on Selected Surfaces

<table>
<thead>
<tr>
<th>Building Component</th>
<th>Paint Condition (Intact, Fair, Poor, or Not Present)</th>
<th>Deterioration Due to Friction or Impact?</th>
<th>Deterioration Due to Moisture?</th>
<th>Location of Painted Component with Visible Bite Marks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Building Siding</td>
<td>Intact</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exterior Trim</td>
<td>Intact</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Window Troughs</td>
<td>Poor</td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Exterior Doors</td>
<td>Fair</td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Railings</td>
<td>Fair</td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Porch Floors</td>
<td>Poor</td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Other Porch Surfaces</td>
<td>Intact</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interior Doors</td>
<td>Fair (Door to Southeast Bedroom is Poor)</td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Ceilings</td>
<td>Fair</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Walls</td>
<td>Intact</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interior Windows</td>
<td>Fair</td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Interior Floors</td>
<td>Fair</td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Interior Trim</td>
<td>Intact</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stairways</td>
<td>Fair</td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Radiator (Or Radiator Cover)</td>
<td>Intact</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kitchen cabinets</td>
<td>Intact</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bathroom cabinets</td>
<td>Fair</td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Other surfaces</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If the overall condition of a component is similar throughout a dwelling, that condition should be recorded. If a component in a couple of locations is in poor condition, but the overall condition is good or fair, the specific sites of the badly deteriorated paint should be noted. The specific locations of any component with bite marks should be recorded.
Form 5.7 (continued)

2. Painting Frequency and Methods
   a. How often is painting completed? every ____5____ years
   b. Is painting completed upon vacancy, if necessary?
      __X____ Yes ______ No
   c. Who does the painting? __X____ Property Owner ______ Residents
      IF Residents, SKIP to Q.2
   d. Is painting accompanied by scraping, sanding, or paint removal?
      ___X___ Yes ______ No
   e. How are paint dust/chips cleaned up? (check one)
      __X____ Sweeping ______ Vacuum ______ Mopping ______ HEPA/TSP/HEPA
   f. Is the work area sealed off during painting?
      ______ Yes __X____ No
   g. Is furniture removed from the work area?
      ______ Yes ___X___ No
   h. If no, is furniture covered during work with plastic?
      ______ Yes ___X___ No

3. Is there a preventive maintenance program?
   ______ Yes ___X___ No

4. Describe work order system (if applicable, attach copy of work order form)
   There is no formal work order system.

5. How are resident complaints received and addressed? How are requests prioritized? If formal work orders are issued, is the presence or potential presence of lead-based paint considered in the work instructions?
   Resident complaints are received directly by the owner, who then authorizes the maintenance employee to complete the necessary repairs. The presence of lead-based paint is not routinely considered in the repair and maintenance work.

6. Record location of dwellings recently prepared for reoccupancy.
   Not Applicable
<table>
<thead>
<tr>
<th>Condition</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Roof Missing Parts of Surfaces (tiles, boards, etc.)</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Roof Has Holes or Large Cracks</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Gutter or Downspouts Broken</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Chimney Masonry cracked, bricks loose or missing, obviously out of plumb</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Exterior or interior walls have obvious large cracks or holes, requiring more than routine painting</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Exterior siding has missing boards or shingles</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Water stains on interior walls or ceilings</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Plaster walls deteriorated</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Two or more windows or doors broken, missing, or boarded up</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Porch or steps have major elements broken, missing, or boarded up</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Foundation has major cracks, missing material, structural leans, or visibly unsound</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>2 (1, see notes)</td>
<td></td>
</tr>
</tbody>
</table>

If the “Yes” column has 2 or more checks, the dwelling is considered to be in poor condition for the purposes of a risk assessment. However, specific conditions and extenuating circumstances should be considered before determining final condition of the building and the appropriateness of a lead hazard screen.

Notes:

Gutter downspout reattached during visit; owner stated this was due to a recent storm.
8. Dwelling Selection Process
   This section is not applicable for this property

9. Analysis of Previous XRF Testing Report
   There is no previous XRF Testing Report; this section is not applicable for this property.
Form 5.3
Field Sampling Form for Deteriorated Paint

Name of Risk Assessor: Michael Hazard
Name of Property Owner: Joseph Smith
Property Address: 1234 Main St, Anywhere Any State, 300000 Apt. No.

Sampling Protocol: X All Dwellings
Targeted: ___________ Worst-Case: ___________ Random: ___________

Target Dwelling Criteria (Check All That Apply):
- Code Violations
- Judged to be in Poor Condition
- Presence of 2 or More Children between Ages of 6 Months and 6 Years
- Serves as Day-Care Facility
- Recently Prepared for Reoccupancy
- Random Sampling
- None of the above

<table>
<thead>
<tr>
<th>Sample Number</th>
<th>Room Description</th>
<th>Building Component</th>
<th>Laboratory Result (µg/g) or XRF Reading (mg/cm²)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Southeast Child’s Bedroom (Bobby’s Room)</td>
<td>Window Trough Frame</td>
<td>9.2 mg/cm² (portable XRF)</td>
</tr>
<tr>
<td>2</td>
<td>Front Porch Floor</td>
<td></td>
<td>0.1 mg/cm² (portable XRF)</td>
</tr>
<tr>
<td>3</td>
<td>Southeast Child’s Bedroom (Bobby’s Room)</td>
<td>Interior Door</td>
<td>5.3 mg/cm² (portable XRF)</td>
</tr>
<tr>
<td>4</td>
<td>Living Room Window Trough Frame</td>
<td></td>
<td>7.8 mg/cm² (portable XRF)</td>
</tr>
</tbody>
</table>

HUD Standard: 5,000 µg/g or 1 mg/cm²

Sample all layers of paint, not just deteriorated paint layers.
Total Number of Samples This Page: 4
Page 1 of 1

Date of Sample Collection: 4/1/94
Date Shipped to Lab: 4/1/94

Shipped by ___________________________ Received by ___________________________
(signature) (signature)

Date Results Reported: 4/10/94
Analyzed by: Lisa Baker
Approved by: Jim Zimmerman
**Form 5.4**

**Field Sampling Form For Dust**
(Single Surface)

Name of Risk Assessor: Michael Hazard
Name of Property Owner: Joseph Smith
Property Address: 1234 Main St, Anywhere, Any State Apt. No.

Dwelling Selection Protocol: X All Dwellings

Target Dwelling Criteria (Check All That Apply):
- Code Violations
- Judged to be in Poor Condition
- Presence of 2 or More Children between Ages of 6 Months and 6 Years
- Serves as Day-Care Facility
- Recently Prepared for Reoccupancy

<table>
<thead>
<tr>
<th>Sample Number</th>
<th>Room (Record Name of Room Used by the Owner or Resident)</th>
<th>Surface Type</th>
<th>Is Surface Smooth and Cleanable?</th>
<th>Dimensions(^1) of Sample Area (inches x inches)</th>
<th>Area (ft(^2))</th>
<th>Result of Lab Analysis (µg/ft(^2))</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Play Room Living Room</td>
<td>Floor</td>
<td>Yes</td>
<td><em>12</em> x <em>12</em></td>
<td>1</td>
<td>79</td>
</tr>
<tr>
<td>2</td>
<td>Play Room Living Room</td>
<td>Interior Window Sill</td>
<td>Yes</td>
<td><em>3</em> x <em>33</em></td>
<td>0.69</td>
<td>150</td>
</tr>
<tr>
<td>3</td>
<td>Kitchen</td>
<td>Floor</td>
<td>Yes</td>
<td><em>12</em> x <em>12</em></td>
<td>1</td>
<td>&lt;25</td>
</tr>
<tr>
<td>4</td>
<td>Kitchen</td>
<td>Window Trough</td>
<td>No</td>
<td><em>3</em> x <em>25</em></td>
<td>0.52</td>
<td>579</td>
</tr>
<tr>
<td>5</td>
<td>Bedroom 1 Bobby (Southeast)</td>
<td>Floor</td>
<td>No</td>
<td><em>12</em> x <em>12</em></td>
<td>1</td>
<td>1,356</td>
</tr>
<tr>
<td>6</td>
<td>Bedroom 1 Bobby (Southeast)</td>
<td>Interior Window Sill</td>
<td>No</td>
<td><em>2.5</em> x <em>34</em></td>
<td>0.59</td>
<td>400</td>
</tr>
<tr>
<td>7</td>
<td>Bedroom 2 Jennifer (Southwest)</td>
<td>Floor</td>
<td>Yes</td>
<td><em>12</em> x <em>12</em></td>
<td>1</td>
<td>29</td>
</tr>
<tr>
<td>8</td>
<td>Bedroom Jennifer (Southwest)</td>
<td>Window Trough</td>
<td>No</td>
<td><em>3</em> x <em>33</em></td>
<td>0.69</td>
<td>600</td>
</tr>
<tr>
<td>9</td>
<td>Blank</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>&lt;25</td>
</tr>
</tbody>
</table>

\(^1\) Measure to the nearest 1/8 inch

Total Number of Samples This Page: 9
Page 1 of 1

Date of Sample Collection: 4/1/94

Date Shipped to Lab: 4/4/94

Shipped by: ________________________________

Received by: ________________________________

(signature)(signature)

HUD Standards: 100 µg/ft\(^2\) (floors), 500 µg/ft\(^2\) (interior window sills), 800 µg/ft\(^2\) (window troughs)

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**App 8.1-15**
Form 5.5
Field Sampling Form For Soil
(Composite Sampling Only)

Name of Risk Assessor __Michael Hazard_______________________
Name of Property Owner ___Joseph Smith________________________
Property Address _1234 Main St. Anywhere, Any State__________________________

<table>
<thead>
<tr>
<th>Sample No.</th>
<th>Location</th>
<th>Bare or Covered</th>
<th>Lab Result (µg/g)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Building Perimeter</td>
<td>Bare</td>
<td>222</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Building Perimeter</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Play Area 1 (describe)</td>
<td>Bare</td>
<td>102</td>
</tr>
<tr>
<td></td>
<td>Back Yard Jungle Gym</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Play Area 2 (describe)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Collect only the top \(\frac{1}{2}\)" of soil

Total Number of Samples This Page____2____
Page ____1____ of ____2____
Date of Sample Collection__4__/__1__/__94__ Date Shipped to Lab__4__/__1__/__94__

Shipped by ___________________________ Received by ___________________________
(signature)(signature)
13. Other sampling results

The owner decided not to have water sampling conducted at this property.
Part III: Lead Hazard Control Options

14. Lead-Based Paint Policy Statement

The owner indicated such a statement would be developed.

15. Name of Individual in Charge of Lead-Based Paint Hazard Control Program: Joseph Smith

16. Recommended Changes to Work Order System and Property Management

The existing work order system is an informal verbal one. If painted surfaces will be disturbed during a particular repair job, the painted surface should be tested to determine if it has lead-based paint on it. If it does (or if testing is not completed), the maintenance worker should take the necessary precautions by wetting down the surface and performing cleanup. If the surface area is large or if the work will generate a significant amount of dust, clearance testing should be completed before residents move back into the room. The table below can be used as a general guide in determining whether maintenance jobs are likely to be high risk or low risk.

When work is assigned, the owner or worker should determine whether or not the job is low or high risk and adopt protective measures as needed.
Table 17.1 (Taken from HUD Guidelines)
Summary of Low- and High-Risk Job Designations for Surfaces Known or Suspected to Have Lead-Based Paint

<table>
<thead>
<tr>
<th>Job Description</th>
<th>Low Risk</th>
<th>High Risk*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Repainting (includes surface preparation)</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Plastering or wall repair</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Window repair</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Water or moisture damage repair (repainting and plumbing)</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Door repair</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Building component replacement</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Welding on Painted Surfaces</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Door lock repair or replacement</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Electrical fixture repair</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Floor refinishing</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Carpet replacement</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Groundskeeping</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Radiator leak repair</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Baluster repair (metal)</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Demolition</td>
<td></td>
<td>√</td>
</tr>
</tbody>
</table>

* High-risk jobs typically disturb more than 2 square feet per room. If these jobs disturb less than 2 square feet, then they can be considered low-risk jobs.