

The US Environmental Protection Agency requires that Renovation, repair and painting projects that disturb lead-based paint in pre-1978 homes, childcare facilities and schools must be performed by an EPA Certified Renovator working for an EPA Certified Firm and specific work practices must be implemented to prevent lead contamination. More information is available at 1-800-424-LEAD [5323] or <http://www2.epa.gov/lead>

LEAD SAFETY for Remodeling, Repair and Painting

Test Kit Documentation Form

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Owner Information

Name of Owner/Occupant: _____
Address: _____
City: _____ State: _____ Zip code: _____ Contact #: (____) ____ - ____
Email: _____

Renovation Information

Fill out all of the following information that is available about the Renovation Site, Firm, and Certified Renovator.	
Renovation Address: _____	Unit# _____
City: _____ State: _____ Zip code: _____	
Certified Firm Name: _____	
Address: _____	
City: _____ State: _____ Zip code: _____	Contact #: (____) ____ - ____
Email: _____	
Certified Renovator Name: _____	Date Certified: / /

Test Kit Information

Use the following blanks to identify the test kit or test kits used in testing components.	
Test Kit #1	
Manufacturer: _____	Manufacture Date: _____
____/____/____	
Model: _____	Serial #: _____
Expiration Date: _____	
Test Kit #2	
Manufacturer: _____	Manufacture Date: _____
____/____/____	
Model: _____	Serial #: _____
Expiration Date: _____	
Test Kit #3	
Manufacturer: _____	Manufacture Date: _____
____/____/____	
Model: _____	Serial #: _____
Expiration Date: _____	

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Renovation Address: _____ Unit# _____
City: _____ State: _____ Zip code: _____

Test Location # _____ **Test Kit Used:** (Circle only one) **Test Kit # 1** **Test Kit # 2** **Test Kit # 3**
Description of component tested including location: _____
Result: Is lead present? (Circle only one) YES NO Presumed
Date of test: ____/____/____

Test Location # _____ **Test Kit Used:** (Circle only one) **Test Kit # 1** **Test Kit # 2** **Test Kit # 3**
Description of component tested including location: _____
Result: Is lead present? (Circle only one) YES NO Presumed
Date of test: ____/____/____

Test Location # _____ **Test Kit Used:** (Circle only one) **Test Kit # 1** **Test Kit # 2** **Test Kit # 3**
Description of component tested including location: _____
Result: Is lead present? (Circle only one) YES NO Presumed
Date of test: ____/____/____

Test Location # _____ **Test Kit Used:** (Circle only one) **Test Kit # 1** **Test Kit # 2** **Test Kit # 3**
Description of component tested including location: _____
Result: Is lead present? (Circle only one) YES NO Presumed
Date of test: ____/____/____

Test Location # _____ **Test Kit Used:** (Circle only one) **Test Kit # 1** **Test Kit # 2** **Test Kit # 3**
Description of component tested including location: _____
Result: Is lead present? (Circle only one) YES NO Presumed
Date of test: ____/____/____

Test Location # _____ **Test Kit Used:** (Circle only one) **Test Kit # 1** **Test Kit # 2** **Test Kit # 3**
Description of component tested including location: _____
Result: Is lead present? (Circle only one) YES NO Presumed
Date of test: ____/____/____

Sample Renovation Recordkeeping Checklist

Name of Firm: _____

Date and Location of Renovation: _____

Brief Description of Renovation: _____

Name of Assigned Renovator: _____

Name(s) of Trained Worker(s), if used: _____

Name of Dust Sampling Technician,
Inspector, or Risk Assessor, if used: _____

Copies of renovator and dust sampling technician qualifications (training certificates, certifications) on file.

Certified renovator provided training to workers on (check all that apply):

Posting warning signs Setting up plastic containment barriers

Maintaining containment Avoiding spread of dust to adjacent areas

Waste handling Post-renovation cleaning

Test kit or test results from an EPA-recognized laboratory on collected paint chip sample, used by certified renovator to determine whether lead was present on components affected by renovation (identify method used, type of test kit used (if applicable), laboratory used to conduct paint chip analysis, describe sampling locations and results):

____ Warning signs posted at entrance to work area.

____ Work area contained to prevent spread of dust and debris

____ All objects in the work area removed or covered (interiors)

____ HVAC ducts in the work area closed and covered (interiors)

____ Windows in the work area closed (interiors)

____ Windows in and within 20 feet of the work area closed (exteriors)

____ Doors in the work area closed and sealed (interiors)

____ Doors in and within 20 feet of the work area closed and sealed (exteriors)

____ Doors that must be used in the work area covered to allow passage but prevent spread of dust

____ Floors in the work area covered with taped-down plastic (interiors)

____ Ground covered by plastic extending 10 feet from work area—plastic anchored to building and weighed down by heavy objects (exteriors)

____ Vertical containment installed if property line prevents 10 feet of ground covering, or if necessary to prevent migration of dust and debris to adjacent property (exteriors)

____ Waste contained on-site and while being transported off-site.

____ Work site properly cleaned after renovation

____ All chips and debris picked up, protective sheeting misted, folded dirty side inward, and taped for removal

____ Work area surfaces and objects cleaned using HEPA vacuum and/or wet cloths or mops (interiors)

____ Certified renovator performed post-renovation cleaning verification (describe results, including the number of wet and dry cloths used): _____

____ If dust clearance testing was performed instead, attach a copy of report

____ I certify under penalty of law that the above information is true and complete.

Name and title

Date