

LEAD HAZARD EVALUATION REPORT**Section 1-Date of Lead Hazard Evaluation** _____**Section 2-Type of Lead Hazard Evaluation** (Check one box only)

Lead inspection

Risk assessment

Clearance inspection

Other (specify) _____

Section 3-Structure Where Lead Hazard Evaluation Was Conducted

Address [number, street, apartment (if applicable)]

City

County

ZIP code

Construction date (year) of structure

Type of structure (check one box only)

Single family dwelling

Multi-unit building

Child-occupied facility

Other (specify) _____

Section 4-Owner of Structure (if business/agency, list contact person)

Name

Telephone number

()

Address [number, street, apartment (if applicable)]

City

State

ZIP code

Section 5-Results of Lead Hazard Evaluation (Check one box only)**No lead-based paint detected.**

A lead inspection was conducted following the procedures outlined in Title 17, California Code of Regulations, Division 1 Chapter 8. No lead-based paint was detected during this lead inspection. This structure is found to be lead-based paint free.

No lead hazards detected

Lead hazard evaluation was conducted following the procedures outlined in Title 17, California Code of Regulations Division 1, Chapter 8. No lead hazards were detected.

Lead-based paint and/or lead hazards detected.

Lead hazard evaluation was conducted following the procedures outlined in Title 17, California Code of Regulations Division 1, Chapter 8. Lead-based paint and/or lead hazards were detected.

Section 6-Individual Conducting Lead Hazard Evaluation

Name

Telephone Number

()

Address [number, street, apartment (if applicable)]

City

State

ZIP code

Brand name and serial number of any portable x-ray fluorescence (XRF) instrument used (if applicable)

DHS certification number

Signature

X

Date

Section 7-Attachments

- A. A foundation diagram or sketch of the structure indicating the specific locations of each lead hazard or presence of lead-based paint;
- B. Each testing method, device, and sampling procedure used;
- C. All data collected, including quality control data, laboratory results, including laboratory name, address, and phone number.

*First copy and attachments retained by inspector**Second copy and attachments retained by owner*

DHS 8552 (12/97)

Third copy only (no attachments) mailed or faxed to:

Childhood Lead Poisoning Prevention Branch
Reports
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