

## BASIC INSPECTION INFORMATION

Inspection Date/Time:

ICIS #:

Inspection Entry:

- ☐ Presented EPA credentials to person in charge and explained purpose and scope of inspection
- ☐ Entry Permitted.
- ☐ Entry Denied. (Provide details in notes.)
- ☐ NOI signed by:

### Facility Information

Firm Name:

DBA or Former Names:

Owner Name & Contact Information:

Person(s) interviewed:

Firm size (# employees, annual revenues, # projects/yr):

Type of work (general contracting, windows, kitchen & bath, etc.): Service area:

Work done on : ☐ target housing ☐ child-occupied facilities

Certified firm? ☐ Yes (copy certificate) ☐ No – give *Small Entity Guide to Renovate Right* and get explanatory statement

### **If firm is certified, obtain copies of records for several properties, as applicable:**

- Description/Scope of work (contracts, work orders, change orders, etc.)
- Lead testing documentation
- Determination that lead-based paint was/was not present on the components affected by the renovation
- Documentation that a certified renovator was assigned
- Documentation that uncertified workers were trained by a certified renovator
- Documentation of compliance with applicable RRP work practice standards
- Signed and dated receipt of *Renovate Right* pamphlet to owner/occupant

|                                                                                                            |                     |
|------------------------------------------------------------------------------------------------------------|---------------------|
| Facility Name:                                                                                             | Inspection Date:    |
| <b>#1</b>                                                                                                  |                     |
| Address of property renovated:                                                                             |                     |
| When did the renovations occur? From                                                                       | to                  |
| What year was the property built?                                                                          |                     |
| Provide a detailed description of the project and/or the permit pulled.                                    |                     |
| Was the property tested for the presence of lead? <input type="checkbox"/> Yes <input type="checkbox"/> No |                     |
| Who conducted the test?                                                                                    | RRP Certification # |
| Summary of records provided/obtained (attach to inspection report)                                         |                     |

|                                                                                                            |
|------------------------------------------------------------------------------------------------------------|
| <b>#2</b>                                                                                                  |
| Address of property renovated:                                                                             |
| When did the renovations occur? From _____ to _____                                                        |
| What year was the property built?                                                                          |
| Provide a detailed description of the project and/or the permit pulled.                                    |
| Was the property tested for the presence of lead? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Who conducted the test? _____ RRP Certification # _____                                                    |
| Summary of records provided/obtained (attach to inspection report)                                         |

|                                                                                                            |                     |
|------------------------------------------------------------------------------------------------------------|---------------------|
| Facility Name:                                                                                             | Inspection Date:    |
| <b>#3</b>                                                                                                  |                     |
| Address of property renovated:                                                                             |                     |
| When did the renovations occur? From                                                                       | to                  |
| What year was the property built?                                                                          |                     |
| Provide a detailed description of the project and/or the permit pulled.                                    |                     |
| Was the property tested for the presence of lead? <input type="checkbox"/> Yes <input type="checkbox"/> No |                     |
| Who conducted the test?                                                                                    | RRP Certification # |
| Summary of records provided/obtained (attach to inspection report)                                         |                     |

|                                                                                                            |
|------------------------------------------------------------------------------------------------------------|
| <b>#4</b>                                                                                                  |
| Address of property renovated:                                                                             |
| When did the renovations occur? From _____ to _____                                                        |
| What year was the property built?                                                                          |
| Provide a detailed description of the project and/or the permit pulled.                                    |
| Was the property tested for the presence of lead? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Who conducted the test? _____ RRP Certification # _____                                                    |
| Summary of records provided/obtained (attach to inspection report)                                         |

|                                                                                                            |                     |
|------------------------------------------------------------------------------------------------------------|---------------------|
| Facility Name:                                                                                             | Inspection Date:    |
| <b>#5</b>                                                                                                  |                     |
| Address of property renovated:                                                                             |                     |
| When did the renovations occur? From                                                                       | to                  |
| What year was the property built?                                                                          |                     |
| Provide a detailed description of the project and/or the permit pulled.                                    |                     |
| Was the property tested for the presence of lead? <input type="checkbox"/> Yes <input type="checkbox"/> No |                     |
| Who conducted the test?                                                                                    | RRP Certification # |
| Summary of records provided/obtained (attach to inspection report)                                         |                     |

| #6                                                                                                         |
|------------------------------------------------------------------------------------------------------------|
| Address of property renovated:                                                                             |
| When did the renovations occur? From _____ to _____                                                        |
| What year was the property built?                                                                          |
| Provide a detailed description of the project and/or the permit pulled.                                    |
| Was the property tested for the presence of lead? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Who conducted the test? _____ RRP Certification # _____                                                    |
| Summary of records provided/obtained (attach to inspection report)                                         |

|                |                  |
|----------------|------------------|
| Facility Name: | Inspection Date: |
|----------------|------------------|

  

|                                                                                                            |
|------------------------------------------------------------------------------------------------------------|
| <b>#7</b>                                                                                                  |
| Address of property renovated:                                                                             |
| When did the renovations occur? From _____ to _____                                                        |
| What year was the property built?                                                                          |
| Provide a detailed description of the project and/or the permit pulled.                                    |
| Was the property tested for the presence of lead? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Who conducted the test? _____ RRP Certification # _____                                                    |
| Summary of records provided/obtained (attach to inspection report)                                         |

|                                                                                                            |
|------------------------------------------------------------------------------------------------------------|
| <b>#8</b>                                                                                                  |
| Address of property renovated:                                                                             |
| When did the renovations occur? From _____ to _____                                                        |
| What year was the property built?                                                                          |
| Provide a detailed description of the project and/or the permit pulled.                                    |
| Was the property tested for the presence of lead? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Who conducted the test? _____ RRP Certification # _____                                                    |
| Summary of records provided/obtained (attach to inspection report)                                         |

|                |                  |
|----------------|------------------|
| Facility Name: | Inspection Date: |
|----------------|------------------|

  

|                                                                                                            |
|------------------------------------------------------------------------------------------------------------|
| <b>#9</b>                                                                                                  |
| Address of property renovated:                                                                             |
| When did the renovations occur? From _____ to _____                                                        |
| What year was the property built?                                                                          |
| Provide a detailed description of the project and/or the permit pulled.                                    |
| Was the property tested for the presence of lead? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Who conducted the test? _____ RRP Certification # _____                                                    |
| Summary of records provided/obtained (attach to inspection report)                                         |

|                                                                                                            |
|------------------------------------------------------------------------------------------------------------|
| <b>#10</b>                                                                                                 |
| Address of property renovated:                                                                             |
| When did the renovations occur? From _____ to _____                                                        |
| What year was the property built?                                                                          |
| Provide a detailed description of the project and/or the permit pulled.                                    |
| Was the property tested for the presence of lead? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Who conducted the test? _____ RRP Certification # _____                                                    |
| Summary of records provided/obtained (attach to inspection report)                                         |

|                |                  |
|----------------|------------------|
| Facility Name: | Inspection Date: |
|----------------|------------------|

Inspection Summary - Inspector Comments and Findings

|                |                  |
|----------------|------------------|
| Facility Name: | Inspection Date: |
|----------------|------------------|

## RECORD OF REVIEW

### Inspector

Inspector who prepared report:

Date report completed:

Signature:

### Reviewer

Reviewed by:

Title:

Signature:

Date: