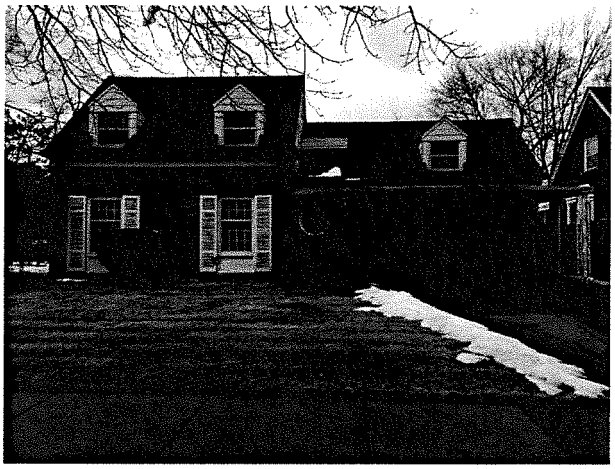
Lead Inspection & Risk Assessment Report

FOR THE PROPERTY AT:

15327 Warwick
Detroit, MI 48223
1925



Prepared For:

OCCUPANT
Alunda Boykin
313-715-7104

OWNER
Alunda Boykin
15327 Warwick
Detroit, MI 48223
313-715-7104

Date of Inspection: 02/18/2020

Date of Report 03/09/2020

Report Prepared and Submitted By:

Donnez Hemphill
Michigan Certification P-05920
XRF Serial Number: 2252

GS GROUP LLC
Green S.P.A.C.E.S. Protect Our Earth

GS GROUP, LLC
17800 Woodward Ave., Suite 200
Detroit, MI 48203
313-279-0449

On behalf of:

City of Detroit Housing & Revitalization Department
Coleman A. Young Municipal Center
2 Woodward Avenue, Suite 908
Detroit, MI 48226

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Purpose of Environmental Investigation

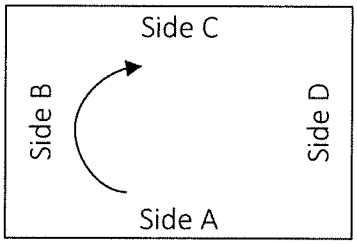
The purpose of this report is to share lead-testing results. *Please refer to Appendix C-3 for your future responsibilities as they relate to this report.* Use the "Key Definitions" below as a guide when reading the results. **Floor plan maps are provided in Appendix B-3 – use these as a guide when reading the results.** See Appendix C for information about lead hazards and abatement versus interim control options.

KEY DEFINITIONS

Component: The surface tested.
Examples: door, door trim, wall, ceiling, exterior siding, etc.

Substrate: The type of material.
Examples: plaster, wood, metal

Side: The location of tested area or item. Side A is always the address side of the building. Sides B, C, and D move in a clockwise direction from Side A.



(Address Side)

Condition: The condition of the paint on the surface tested.
Intact means undamaged, or in one piece.
Deteriorated means damaged, worn, or in bad shape.

Color: The color of the surface tested.

Floor: The floor of the building.
Basements identified are "Floor 0."

Room: The room testing occurred. Rooms are identified by a number because room usage may change (i.e., a bedroom may become an office). Kitchens and bathrooms are not numbered.

Result: Indicates if tested. Positive or negative result for lead shared.

Teeth: Indicates if teeth marks are present.

Fric-Imp: Friction-Impact occurs when two components rub or come into contact repeatedly.

Lead Testing

RESULTS & RECOMMENDATIONS

The table below details all of the lead-hazards found in your home.

TABLE 1: ALL LEAD-HAZARDS				
COMPONENT & LOCATION OF HAZARD	SEVERITY*	PRIORITY**	ABATEMENT OPTIONS	INTERIM CONTROL OPTIONS
KITCHEN Window Trough (Dust)	1	1	1) Enclose all lead painted surfaces or 2) replace individual lead painted components or 3) strip all surfaces bare to the substrate (either chemically or using mechanical wet methods), stabilize surfaces, and paint.	Wet scrape/sand all surfaces, make necessary repairs, stabilize all surfaces and re-paint or perform lead cleaning.
BATHROOM 2 Window Trough (Dust)	1	1	1) Enclose all lead painted surfaces or 2) replace individual lead painted components or 3) strip all surfaces bare to the substrate (either chemically or using mechanical wet methods), stabilize surfaces, and paint.	Wet scrape/sand all surfaces, make necessary repairs, stabilize all surfaces and re-paint or perform lead cleaning.
BEDROOM 3 Window Sill (Dust)	1	1	1) Enclose all lead painted surfaces or 2) replace individual lead painted components or 3) strip all surfaces bare to the substrate (either chemically or using mechanical wet methods), stabilize surfaces, and paint.	Wet scrape/sand all surfaces, make necessary repairs, stabilize all surfaces and re-paint or perform lead cleaning.
Bedroom 3	1	1		

COMPONENT & LOCATION OF HAZARD	SEVERITY*	PRIORITY**	ABATEMENT OPTIONS	INTERIM CONTROL OPTIONS
Wall A Window Sill			1) Enclose all lead painted surfaces or 2) replace individual lead painted components or 3) strip all surfaces bare to the substrate (either chemically or using mechanical wet methods), stabilize surfaces, and paint.	Wet scrape/sand all surfaces, make necessary repairs, stabilize all surfaces and re-paint or perform lead cleaning.
Bedroom 3 Wall C Door Casing & Panel	1	1	1) Enclose all lead painted surfaces or 2) replace individual lead painted components or 3) strip all surfaces bare to the substrate (either chemically or using mechanical wet methods), stabilize surfaces, and paint.	Wet scrape/sand all surfaces, make necessary repairs, stabilize all surfaces and re-paint or perform lead cleaning.
Bedroom 4 Wall D Window Sill	1	1	1) Enclose all lead painted surfaces or 2) replace individual lead painted components or 3) strip all surfaces bare to the substrate (either chemically or using mechanical wet methods), stabilize surfaces, and paint.	Wet scrape/sand all surfaces, make necessary repairs, stabilize all surfaces and re-paint or perform lead cleaning.
Bedroom 4 Wall B Window 1 Sash	1	1	1) Enclose all lead painted surfaces or 2) replace individual lead painted components or 3) strip all surfaces bare to the substrate (either chemically or using mechanical wet methods), stabilize surfaces, and paint.	Wet scrape/sand all surfaces, make necessary repairs, stabilize all surfaces and re-paint or perform lead cleaning.
Bedroom 4	1	1		

COMPONENT & LOCATION OF HAZARD	SEVERITY*	PRIORITY**	ABATEMENT OPTIONS	INTERIM CONTROL OPTIONS
Wall B Window 2 Sill			1) Enclose all lead painted surfaces or 2) replace individual lead painted components or 3) strip all surfaces bare to the substrate (either chemically or using mechanical wet methods), stabilize surfaces, and paint.	Wet scrape/sand all surfaces, make necessary repairs, stabilize all surfaces and re-paint or perform lead cleaning.
Bedroom 4 Wall C Window Sill	1	1	1) Enclose all lead painted surfaces or 2) replace individual lead painted components or 3) strip all surfaces bare to the substrate (either chemically or using mechanical wet methods), stabilize surfaces, and paint.	Wet scrape/sand all surfaces, make necessary repairs, stabilize all surfaces and re-paint or perform lead cleaning.
Bedroom 4 Wall C Door Casing	1	1	1) Enclose all lead painted surfaces or 2) replace individual lead painted components or 3) strip all surfaces bare to the substrate (either chemically or using mechanical wet methods), stabilize surfaces, and paint.	Wet scrape/sand all surfaces, make necessary repairs, stabilize all surfaces and re-paint or perform lead cleaning.
Exterior Wall D Door Casing	1	1	1) Enclose all lead painted surfaces or 2) replace individual lead painted components or 3) strip all surfaces bare to the substrate (either chemically or using mechanical wet methods), stabilize surfaces, and paint.	Wet scrape/sand all surfaces, make necessary repairs, stabilize all surfaces and re-paint or perform lead cleaning.
Exterior	1	1		

COMPONENT & LOCATION OF HAZARD	SEVERITY*	PRIORITY**	ABATEMENT OPTIONS	INTERIM CONTROL OPTIONS
Wall A Address Plate			1) Enclose all lead painted surfaces or 2) replace individual lead painted components or 3) strip all surfaces bare to the substrate (either chemically or using mechanical wet methods), stabilize surfaces, and paint.	Wet scrape/sand all surfaces, make necessary repairs, stabilize all surfaces and re-paint or perform lead cleaning.
Exterior Wall A Windows 1, 2 & 3 Sashes & Stops	1	1	1) Enclose all lead painted surfaces or 2) replace individual lead painted components or 3) strip all surfaces bare to the substrate (either chemically or using mechanical wet methods), stabilize surfaces, and paint.	Wet scrape/sand all surfaces, make necessary repairs, stabilize all surfaces and re-paint or perform lead cleaning.
Exterior Wall B Windows 2, 3 & 4 Storm Sashes	1	1	1) Enclose all lead painted surfaces or 2) replace individual lead painted components or 3) strip all surfaces bare to the substrate (either chemically or using mechanical wet methods), stabilize surfaces, and paint.	Wet scrape/sand all surfaces, make necessary repairs, stabilize all surfaces and re-paint or perform lead cleaning.
Garage Wall A Doors 1 & 2 Casings & Jambs	1	1	1) Enclose all lead painted surfaces or 2) replace individual lead painted components or 3) strip all surfaces bare to the substrate (either chemically or using mechanical wet methods), stabilize surfaces, and paint.	Wet scrape/sand all surfaces, make necessary repairs, stabilize all surfaces and re-paint or perform lead cleaning.
Garage	1	1		

COMPONENT & LOCATION OF HAZARD	SEVERITY*	PRIORITY**	ABATEMENT OPTIONS	INTERIM CONTROL OPTIONS
Wall A Doors 1 & 2 Lintels			1) Enclose all lead painted surfaces or 2) replace individual lead painted components or 3) strip all surfaces bare to the substrate (either chemically or using mechanical wet methods), stabilize surfaces, and paint.	Wet scrape/sand all surfaces, make necessary repairs, stabilize all surfaces and re-paint or perform lead cleaning.
Exterior Wall A Windows 1 & 2 Shutters	1	1	1) Enclose all lead painted surfaces or 2) replace individual lead painted components or 3) strip all surfaces bare to the substrate (either chemically or using mechanical wet methods), stabilize surfaces, and paint.	Wet scrape/sand all surfaces, make necessary repairs, stabilize all surfaces and re-paint or perform lead cleaning.

** Severity: 1 = most severe; 2 = very severe; 3 = somewhat severe*

***Priority: 1 = high priority; 2 = medium priority; 3 = low priority*

RESULTS OF TESTED SURFACES

The following tables detail levels of lead found in paint, dust, and soil on your property.

Positive Lead-Paint Results

All paint testing results in Appendix D.

TABLE 2: POSITIVE LEAD-PAINT RESULTS

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULTS
12	Single Family	2nd Floor	Bedroom 3	1	D	Wall	Baseboard	Wood	White	Intact	None	No	No	No	2.7	1	Positive
14	Single Family	2nd Floor	Bedroom 3	1	D	Window	Casing	Wood	White	Intact	None	No	No	No	3.9	1	Positive
15	Single Family	2nd Floor	Bedroom 3	1	D	Window	Sash	Wood	White	Intact	None	No	No	No	7.5	1	Positive
16	Single Family	2nd Floor	Bedroom 3	1	A	Window	Sill	Wood	White	Deteriorated	Substrate	No	No	No	4.8	1	Positive

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULTS
17	Single Family	2nd Floor	Bedroom 3	1	A	Window	Jamb	Wood	White	Intact	None	No	No	No	1.4	1	Positive
18	Single Family	2nd Floor	Bedroom 3	1	A	Door	Casing	Wood	White	Intact	None	No	No	No	4.1	1	Positive
19	Single Family	2nd Floor	Bedroom 3	1	A	Door	Panel	Wood	White	Intact	None	No	No	No	7.8	1	Positive
25	Single Family	2nd Floor	Bedroom 3	1	A	Closet	Shelf	Wood	White	Intact	None	No	No	No	2.8	1	Positive
26	Single Family	2nd Floor	Bedroom 3	1	A	Closet	Rail	Wood	White	Intact	None	No	No	No	3.1	1	Positive
27	Single Family	2nd Floor	Bedroom 3	1	A	Closet	Chute	Wood	White	Intact	None	No	No	No	6.2	1	Positive
28	Single Family	2nd Floor	Bedroom 3	1	C	Door	Jamb	Wood	White	Intact	None	No	No	No	3.3	1	Positive
29	Single Family	2nd Floor	Bedroom 3	1	C	Door	Casing	Wood	White	Deteriorated	Substrate	No	No	No	4.1	1	Positive
30	Single Family	2nd Floor	Bedroom 3	1	C	Door	Panel	Wood	White	Deteriorated	Substrate	No	No	No	3.2	1	Positive
31	Single Family	1st Floor	Entry Hall	2	N/A	Ceiling	Ceiling	Plaster	White	Intact	None	No	No	No	1	1	Positive
36	Single Family	1st Floor	Entry Hall	2	D	Wall	Baseboard	Wood	White	Intact	None	No	No	No	3.6	1	Positive
39	Single Family	1st Floor	Entry Hall	2	D	Door2	Casing	Wood	White	Intact	None	No	No	No	3.7	1	Positive
40	Single Family	1st Floor	Entry Hall	2	A	Door	Casing	Wood	White	Intact	None	No	No	No	3.3	1	Positive
41	Single Family	1st Floor	Entry Hall	2	A	Door	Panel	Wood	White	Intact	None	No	No	No	6.6	1	Positive
42	Single Family	1st Floor	Entry Hall	2	A	Door1	Casing	Wood	White	Intact	None	No	No	No	3.2	1	Positive
43	Single Family	1st Floor	Entry Hall	2	B	Door1	Jamb	Wood	White	Intact	None	No	No	No	4.6	1	Positive
45	Single Family	1st Floor	Entry Hall	2	B	Door2	Casing	Wood	White	Intact	None	No	No	No	4	1	Positive
46	Single Family	1st Floor	Entry Hall	2	B	Door3	Casing	Wood	White	Intact	None	No	No	No	3.5	1	Positive
47	Single Family	1st Floor	Entry Hall	2	B	Door3	Jamb	Wood	White	Intact	None	No	No	No	3.4	1	Positive
48	Single Family	1st Floor	Entry Hall	2	B	Closet	Ceiling	Plaster	White	Intact	None	No	No	No	6.9	1	Positive
51	Single Family	1st Floor	Entry Hall	2	B	Closet	Rail	Wood	White	Intact	None	No	No	No	2.8	1	Positive
52	Single Family	1st Floor	Entry Hall	2	B	Closet	Shelf	Wood	White	Intact	None	No	No	No	1.2	1	Positive
57	Single Family	1st Floor	Bathroom1	3	A	Window	Casing	Wood	White	Intact	None	No	No	No	3.5	1	Positive
58	Single Family	1st Floor	Bathroom1	3	A	Window	Sash	Wood	White	Intact	None	No	No	No	10.8	1	Positive
59	Single Family	1st Floor	Bathroom1	3	C	Door	Casing	Wood	White	Intact	None	No	No	No	7.2	1	Positive

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULTS
60	Single Family	1st Floor	Bathroom1	3	C	Door	Stop	Wood	White	Intact	None	No	No	No	5.9	1	Positive
62	Single Family	1st Floor	Kitchen	4	A	Wall	Wall	Plaster	Gray	Intact	None	No	No	No	1	1	Positive
65	Single Family	1st Floor	Kitchen	4	D	Wall	Wall	Plaster	Gray	Intact	None	No	No	No	1	1	Positive
66	Single Family	1st Floor	Kitchen	4	D	Wall	Baseboard	Wood	White	Intact	None	No	No	No	4.5	1	Positive
68	Single Family	1st Floor	Kitchen	4	D	Door	Jamb	Wood	White	Intact	None	No	No	No	4.3	1	Positive
70	Single Family	1st Floor	Kitchen	4	A	Window	Casing	Wood	White	Intact	None	No	No	No	4.6	1	Positive
71	Single Family	1st Floor	Kitchen	4	A	Window	Sill	Wood	White	Intact	None	No	No	No	3.3	1	Positive
73	Single Family	1st Floor	Kitchen	4	D	Cabinet	Stile	Wood	White	Intact	None	No	No	No	9.1	1	Positive
80	Single Family	1st Floor	Living Room	5	C	Door	Casing	Plaster	White	Intact	None	No	No	No	7.7	1	Positive
81	Single Family	1st Floor	Living Room	5	C	Door	Stile	Plaster	White	Intact	None	No	No	No	5	1	Positive
82	Single Family	1st Floor	Living Room	5	C	Fireplace	Mantle	Wood	White	Intact	None	No	No	No	10.1	1	Positive
83	Single Family	1st Floor	Living Room	5	A	Door	Casing	Wood	White	Intact	None	No	No	No	4.9	1	Positive
86	Single Family	1st Floor	Dining Rm	6	B	Window2	Stop	Wood	White	Intact	None	No	No	No	5.6	1	Positive
87	Single Family	1st Floor	Dining Rm	6	B	Window2	Casing	Wood	White	Intact	None	No	No	No	7.6	1	Positive
88	Single Family	1st Floor	Dining Rm	6	B	Window1	Casing	Wood	White	Intact	None	No	No	No	5.2	1	Positive
89	Single Family	1st Floor	Dining Rm	6	B	Window1	Sash	Wood	White	Intact	None	No	No	No	8.5	1	Positive
117	Single Family	1st Floor	Stairwell1	9	D	Wall	Baseboard	Wood	White	Intact	None	No	No	No	6.8	1	Positive
121	Single Family	1st Floor	Stairwell1	9	B	Stair	Riser	Wood	White	Intact	None	No	No	No	6.1	1	Positive
122	Single Family	1st Floor	Stairwell1	9	B	Stair	Stringer	Wood	White	Intact	None	No	No	No	5.7	1	Positive
128	Single Family	Second	Bedroom2	10	B	Wall	Baseboard	Wood	White	Intact	None	No	No	No	4.2	1	Positive
129	Single Family	Second	Bedroom2	10	B	Door1	Casing	Wood	White	Intact	None	No	No	No	3.3	1	Positive
130	Single Family	Second	Bedroom2	10	B	Door1	Panel	Wood	White	Intact	None	No	No	No	6.4	1	Positive
131	Single Family	Second	Bedroom2	10	B	Door2	Jamb	Wood	White	Intact	None	No	No	No	3	1	Positive
132	Single Family	Second	Bedroom2	10	B	Door2	Casing	Wood	White	Intact	None	No	No	No	3.3	1	Positive
133	Single Family	Second	Bedroom2	10	A	Window	Casing	Wood	White	Intact	None	No	No	No	2.8	1	Positive

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULTS
134	Single Family	Second	Bedroom2	10	A	Window	Apron	Wood	White	Intact	None	No	No	No	3.1	1	Positive
135	Single Family	Second	Bedroom2	10	D	Window	Apron	Wood	White	Intact	None	No	No	No	3.1	1	Positive
136	Single Family	Second	Bedroom2	10	D	Window	Casing	Wood	White	Intact	None	No	No	No	3	1	Positive
137	Single Family	Second	Bedroom2	10	D	Wall	Shelf	Wood	White	Intact	None	No	No	No	1.7	1	Positive
143	Single Family	Second	Bedroom2	10	B	Closet	Access Panel	Plaster	White	Intact	None	No	No	No	4.5	1	Positive
144	Single Family	Second	Bedroom2	10	B	Closet	Rail	Wood	White	Intact	None	No	No	No	2.9	1	Positive
145	Single Family	Second	Bedroom2	10	B	Closet	Shelf	Wood	White	Intact	None	No	No	No	3.6	1	Positive
151	Single Family	Second	Bedroom4	11	D	Wall	Baseboard	Wood	White	Intact	None	No	No	No	3.3	1	Positive
152	Single Family	Second	Bedroom4	11	D	Door	Jamb	Wood	White	Intact	None	No	No	No	3.4	1	Positive
154	Single Family	Second	Bedroom4	11	D	Window	Apron	Wood	White	Intact	None	No	No	No	2.8	1	Positive
155	Single Family	Second	Bedroom4	11	D	Window	Sill	Wood	White	Deteriorated	Substrate	No	No	No	2.6	1	Positive
156	Single Family	Second	Bedroom4	11	B	Door	Casing	Wood	White	Intact	None	No	No	No	3.8	1	Positive
158	Single Family	Second	Bedroom4	11	B	Window1	Sash	Wood	White	Deteriorated	Substrate	No	No	No	9.7	1	Positive
159	Single Family	Second	Bedroom4	11	B	Window1	Casing	Wood	White	Intact	None	No	No	No	3.3	1	Positive
160	Single Family	Second	Bedroom4	11	B	Window2	Sill	Wood	White	Deteriorated	Substrate	No	No	No	2.2	1	Positive
161	Single Family	Second	Bedroom4	11	B	Window2	Sash	Wood	White	Intact	None	No	No	No	10.5	1	Positive
162	Single Family	Second	Bedroom4	11	C	Window	Sill	Wood	White	Deteriorated	Substrate	No	No	No	3.4	1	Positive
163	Single Family	Second	Bedroom4	11	C	Window	Casing	Wood	White	Intact	None	No	No	No	3.1	1	Positive
164	Single Family	Second	Bedroom4	11	C	Door	Casing	Wood	White	Deteriorated	Substrate	No	No	No	3.7	1	Positive
165	Single Family	Second	Bedroom4	11	C	Door	Jamb	Wood	White	Intact	None	No	No	No	3.6	1	Positive
175	Single Family	Second	Bathroom3	12	C	Wall	Wall	Plaster	White	Intact	None	No	No	No	1	1	Positive
177	Single Family	Second	Bathroom3	12	A	Door	Casing	Wood	White	Intact	None	No	No	No	3.1	1	Positive
179	Single Family	Second	Bathroom3	12	D	Door	Casing	Wood	White	Intact	None	No	No	No	6.8	1	Positive
180	Single Family	Second	Bathroom3	12	D	Door	Panel	Wood	White	Intact	None	No	No	No	5.5	1	Positive
181	Single Family	Second	Bathroom3	12	C	Window	Casing	Wood	White	Intact	None	No	No	No	3.9	1	Positive

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULTS
182	Single Family	Second	Bathroom3	12	C	Window	Sill	Wood	White	Intact	None	No	No	No	3.3	1	Positive
183	Single Family	Second	Bathroom3	12	D	Closet	Ceiling	Wood	White	Intact	None	No	No	No	4.5	1	Positive
184	Single Family	Second	Bathroom3	12	D	Closet	A Wall	Wood	White	Intact	None	No	No	No	4.5	1	Positive
185	Single Family	Second	Bathroom3	12	D	Closet	C Wall	Wood	White	Intact	None	No	No	No	5.1	1	Positive
187	Single Family	Second	Bathroom3	12	D	Closet	Rail	Wood	White	Intact	None	No	No	No	1.3	1	Positive
188	Single Family	Second	Bathroom3	12	D	Closet	Drawer	Wood	White	Intact	None	No	No	No	4.8	1	Positive
194	Single Family	Second	Hall	13	A	Door	Casing	Wood	White	Intact	None	No	No	No	8.2	1	Positive
195	Single Family	Second	Hall	13	A	Door	Jamb	Wood	White	Intact	None	No	No	No	7	1	Positive
196	Single Family	Second	Hall	13	B	Door	Jamb	Wood	White	Intact	None	No	No	No	4.2	1	Positive
197	Single Family	Second	Hall	13	B	Door	Panel	Wood	White	Intact	None	No	No	No	3.7	1	Positive
198	Single Family	Second	Hall	13	C	Door1	Panel	Wood	White	Intact	None	No	No	No	2.8	1	Positive
199	Single Family	Second	Hall	13	C	Door1	Stop	Wood	White	Intact	None	No	No	No	3.8	1	Positive
200	Single Family	Second	Hall	13	C	Door2	Casing	Wood	White	Intact	None	No	No	No	4.5	1	Positive
201	Single Family	Second	Hall	13	C	Door2	Rail	Wood	White	Intact	None	No	No	No	3.2	1	Positive
202	Single Family	First	Exterior	14	D	Door	Jamb	Wood	White	Intact	None	No	No	No	25.8	1	Positive
203	Single Family	First	Exterior	14	D	Door	Casing	Wood	White	Deteriorated	Moisture	No	No	No	29	1	Positive
204	Single Family	First	Exterior	14	A	Wall	Address Plate	Wood	White	Deteriorated	Moisture	No	No	No	16.8	1	Positive
205	Single Family	First	Exterior	14	A	Window1	Sash	Wood	White	Deteriorated	Moisture	No	No	No	8.9	1	Positive
206	Single Family	First	Exterior	14	A	Window1	Stop	Wood	White	Deteriorated	Moisture	No	No	No	8.3	1	Positive
207	Single Family	First	Exterior	14	A	Window2	Stop	Wood	White	Deteriorated	Moisture	No	No	No	7.3	1	Positive
208	Single Family	First	Exterior	14	A	Window2	Sash	Wood	White	Deteriorated	Moisture	No	No	No	8	1	Positive
209	Single Family	First	Exterior	14	A	Window3	Stop	Wood	White	Deteriorated	Moisture	No	No	No	8.6	1	Positive
210	Single Family	First	Exterior	14	A	Window3	Sash	Wood	White	Deteriorated	Moisture	No	No	No	8.4	1	Positive
247	Single Family	First	Garage	19	A	Door1	Casing	Wood	White	Deteriorated	Moisture	No	No	No	26.1	1	Positive
248	Single Family	First	Garage	19	A	Door1	Jamb	Wood	White	Deteriorated	Moisture	No	No	No	29.8	1	Positive

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULTS
249	Single Family	First	Garage	19	A	Door2	Jamb	Wood	White	Deteriorated	Moisture	No	No	No	33	1	Positive
250	Single Family	First	Garage	19	A	Door2	Casing	Wood	White	Deteriorated	Moisture	No	No	No	23.8	1	Positive
251	Single Family	First	Garage	19	A	Door2	Lintel	Metal	White	Deteriorated	Moisture	No	No	No	27	1	Positive
252	Single Family	First	Garage	19	A	Door1	Lintel	Metal	White	Deteriorated	Moisture	No	No	No	23.9	1	Positive
256	Single Family	First	Exterior	14	B	Window 2	Storm Sash	Wood	White	Deteriorated	Moisture	No	No	No	2.8	1	Positive
257	Single Family	First	Exterior	14	B	Window 3	Sorm Sash	Wood	White	Deteriorated	Moisture	No	No	No	6.3	1	Positive
258	Single Family	First	Exterior	14	B	Window 4	Storm Sash	Wood	White	Deteriorated	Moisture	No	No	No	2.1	1	Positive
259	Single Family	First	Exterior	14	A	Window1	Shutter	Wood	White	Deteriorated	Moisture	No	No	No	1.3	1	Positive
260	Single Family	First	Exterior	14	A	Window 2	Shutter	Wood	White	Deteriorated	Moisture	No	No	No	2	1	Positive

**HUD reporting limits for positive XRF results are ≥ 1.0 mg/cm² (milligrams per square centimeter) for painted or glazed surfaces.*

Dust Wipe Sample Results

TABLE 3: DUST WIPE SAMPLE RESULTS

SAMPLE #	ROOM/WIPE LOCATION	SURFACE TESTED HF Hard Floor CF Carpet Floor T Trough S Stool/Sill O Other	LEAD HAZARD?	LAB RESULT (µg/ft²)
1	LIVING ROOM	HF	No	<5.00
2	LIVING ROOM	S	No	51.69
3	DINING ROOM	HF	No	<5.00
4	DINING ROOM	S	No	32.48
5	KITCHEN	HF	No	<5.00
6	**KITCHEN**	**T**	**Yes**	**32810.82**

SAMPLE #	ROOM/WIPE LOCATION	SURFACE TESTED HF Hard Floor CF Carpet Floor T Trough S Stool/Sill O Other	LEAD HAZARD?	LAB RESULT (µg/ft²)
7	BATHROOM 2	HF	No	5.34
8	**BATHROOM 2**	**T**	**Yes**	**174.73**
9	BEDROOM 1	HF	No	<5.00
10	BEDROOM 1	T2	No	<21.18
11	BEDROOM 3	HF	No	5.25
12	**BEDROOM 3**	**S**	**Yes**	**144.87**
13	Field Blank	N/A	No	<5.00

For all HUD/Medicaid projects lead action levels for dust: Floors = 10 µg/ft² (micrograms per square feet); Porches = 40 µg/ft²; Window stools/interior sills = 100 µg/ft²; Window troughs = 100 µg/ft². BRL = Below Reporting Limits. N/D = Not Detected.

Soil Sample Results

☒ Soil samples not collected due to snow or frozen ground.

☐ Soil samples not collected due to no bare soil present.

If either box above is checked, soil sample results will not be included because soil samples were not taken.

TABLE 4: SOIL SAMPLE RESULTS				
SAMPLE #	LOCATION OF BARE SOIL AREA	APPROXIMATE AREA IN SQUARE-FEET (FT^2)	LEAD HAZARD?	LAB RESULT IN PARTS PER MILLION (ppm)
N/A	N/A	N/A	N/A	N/A

EPA and HUD lead action levels: Soil – at 1,200 ppm; Child play areas and gardens – at 400 ppm or more. BRL = Below Reporting Limits. N/D = Not Detected.

Other Surface Sample Results

The table below details all surfaces that do not have paint that were tested. Testing these surfaces can help find other sources of lead-exposure. These surfaces are not required to be tested.

TABLE 5: OTHER SURFACE SAMPLE RESULTS			
SURFACE/ITEM DESCRIPTION	LOCATION	MATERIAL	RESULT (mg/cm^2)
N/A	N/A	N/A	N/A

Items listed above were tested using an XRF. The results are limited because the surfaces tested do not comply with the devices testing ability. ***Positive lead results are in bold.*** *These items may be a potential source of lead exposure. [mg/cm^2 = milligrams per square centimeter]*

SURFACES UNABLE TO BE TESTED

A lead investigation requires testing all painted surfaces. Some painted surfaces in your home may be out of reach. These surfaces are not tested. Surfaces out of reach that are not tested are assumed to contain lead-based paint. If the paint looks deteriorated, the surface is assumed a lead-based paint hazard. The table below details all of the untested painted surfaces. It also details why the surface was not tested.

TABLE 6: SURFACES UNABLE TO TEST		
ROOM	COMPONENT	REASON NOT TESTED
EXTERIOR	WALL B WINDOW STOPS & SASHES	FIXED WINDOW
EXTERIOR	WALL B WINDOW LINTELS	COULD NOT REACH

HUD reporting limits for positive XRF results are ≥ 1.0 mg/cm^2 (milligrams per square centimeter) for painted or glazed surface.

POTENTIAL HAZARDS

Lead can exist in your home and not be a hazard. The table below details all surfaces found to contain lead but are not current hazards. Please make a note of these surfaces and remember to monitor them for changes. Any changes could make the surface a lead-hazard, which will alter severity and priority levels and require lead hazard control options. Refer to Appendix C-3 for ways to monitor.

TABLE 7: POTENTIAL HAZARDS

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULT
12	Single Family	2nd Floor	Bedroom 3	1	D	Wall	Baseboard	Wood	White	Intact	None	No	No	No	2.7	1	Positive
14	Single Family	2nd Floor	Bedroom 3	1	D	Window	Casing	Wood	White	Intact	None	No	No	No	3.9	1	Positive
15	Single Family	2nd Floor	Bedroom 3	1	D	Window	Sash	Wood	White	Intact	None	No	No	No	7.5	1	Positive
17	Single Family	2nd Floor	Bedroom 3	1	A	Window	Jamb	Wood	White	Intact	None	No	No	No	1.4	1	Positive
18	Single Family	2nd Floor	Bedroom 3	1	A	Door	Casing	Wood	White	Intact	None	No	No	No	4.1	1	Positive
19	Single Family	2nd Floor	Bedroom 3	1	A	Door	Panel	Wood	White	Intact	None	No	No	No	7.8	1	Positive
25	Single Family	2nd Floor	Bedroom 3	1	A	Closet	Shelf	Wood	White	Intact	None	No	No	No	2.8	1	Positive
26	Single Family	2nd Floor	Bedroom 3	1	A	Closet	Rail	Wood	White	Intact	None	No	No	No	3.1	1	Positive
27	Single Family	2nd Floor	Bedroom 3	1	A	Closet	Chute	Wood	White	Intact	None	No	No	No	6.2	1	Positive
28	Single Family	2nd Floor	Bedroom 3	1	C	Door	Jamb	Wood	White	Intact	None	No	No	No	3.3	1	Positive
31	Single Family	1st Floor	Entry Hall	2	N/A	Ceiling	Ceiling	Plaster	White	Intact	None	No	No	No	1	1	Positive
36	Single Family	1st Floor	Entry Hall	2	D	Wall	Baseboard	Wood	White	Intact	None	No	No	No	3.6	1	Positive
39	Single Family	1st Floor	Entry Hall	2	D	Door2	Casing	Wood	White	Intact	None	No	No	No	3.7	1	Positive
40	Single Family	1st Floor	Entry Hall	2	A	Door	Casing	Wood	White	Intact	None	No	No	No	3.3	1	Positive
41	Single Family	1st Floor	Entry Hall	2	A	Door	Panel	Wood	White	Intact	None	No	No	No	6.6	1	Positive
42	Single Family	1st Floor	Entry Hall	2	A	Door1	Casing	Wood	White	Intact	None	No	No	No	3.2	1	Positive
43	Single Family	1st Floor	Entry Hall	2	B	Door1	Jamb	Wood	White	Intact	None	No	No	No	4.6	1	Positive
45	Single Family	1st Floor	Entry Hall	2	B	Door2	Casing	Wood	White	Intact	None	No	No	No	4	1	Positive
46	Single Family	1st Floor	Entry Hall	2	B	Door3	Casing	Wood	White	Intact	None	No	No	No	3.5	1	Positive

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULT
47	Single Family	1st Floor	Entry Hall	2	B	Door3	Jamb	Wood	White	Intact	None	No	No	No	3.4	1	Positive
48	Single Family	1st Floor	Entry Hall	2	B	Closet	Ceiling	Plaster	White	Intact	None	No	No	No	6.9	1	Positive
51	Single Family	1st Floor	Entry Hall	2	B	Closet	Rail	Wood	White	Intact	None	No	No	No	2.8	1	Positive
52	Single Family	1st Floor	Entry Hall	2	B	Closet	Shelf	Wood	White	Intact	None	No	No	No	1.2	1	Positive
57	Single Family	1st Floor	Bathroom1	3	A	Window	Casing	Wood	White	Intact	None	No	No	No	3.5	1	Positive
58	Single Family	1st Floor	Bathroom1	3	A	Window	Sash	Wood	White	Intact	None	No	No	No	10.8	1	Positive
59	Single Family	1st Floor	Bathroom1	3	C	Door	Casing	Wood	White	Intact	None	No	No	No	7.2	1	Positive
60	Single Family	1st Floor	Bathroom1	3	C	Door	Stop	Wood	White	Intact	None	No	No	No	5.9	1	Positive
62	Single Family	1st Floor	Kitchen	4	A	Wall	Wall	Plaster	Gray	Intact	None	No	No	No	1	1	Positive
65	Single Family	1st Floor	Kitchen	4	D	Wall	Wall	Plaster	Gray	Intact	None	No	No	No	1	1	Positive
66	Single Family	1st Floor	Kitchen	4	D	Wall	Baseboard	Wood	White	Intact	None	No	No	No	4.5	1	Positive
68	Single Family	1st Floor	Kitchen	4	D	Door	Jamb	Wood	White	Intact	None	No	No	No	4.3	1	Positive
70	Single Family	1st Floor	Kitchen	4	A	Window	Casing	Wood	White	Intact	None	No	No	No	4.6	1	Positive
71	Single Family	1st Floor	Kitchen	4	A	Window	Sill	Wood	White	Intact	None	No	No	No	3.3	1	Positive
73	Single Family	1st Floor	Kitchen	4	D	Cabinet	Stile	Wood	White	Intact	None	No	No	No	9.1	1	Positive
80	Single Family	1st Floor	Living Room	5	C	Door	Casing	Plaster	White	Intact	None	No	No	No	7.7	1	Positive
81	Single Family	1st Floor	Living Room	5	C	Door	Stile	Plaster	White	Intact	None	No	No	No	5	1	Positive
82	Single Family	1st Floor	Living Room	5	C	Fireplace	Mantle	Wood	White	Intact	None	No	No	No	10.1	1	Positive
83	Single Family	1st Floor	Living Room	5	A	Door	Casing	Wood	White	Intact	None	No	No	No	4.9	1	Positive
86	Single Family	1st Floor	Dining Rm	6	B	Window2	Stop	Wood	White	Intact	None	No	No	No	5.6	1	Positive
87	Single Family	1st Floor	Dining Rm	6	B	Window2	Casing	Wood	White	Intact	None	No	No	No	7.6	1	Positive
88	Single Family	1st Floor	Dining Rm	6	B	Window1	Casing	Wood	White	Intact	None	No	No	No	5.2	1	Positive
89	Single Family	1st Floor	Dining Rm	6	B	Window1	Sash	Wood	White	Intact	None	No	No	No	8.5	1	Positive
117	Single Family	1st Floor	Stairwell1	9	D	Wall	Baseboard	Wood	White	Intact	None	No	No	No	6.8	1	Positive
121	Single Family	1st Floor	Stairwell1	9	B	Stair	Riser	Wood	White	Intact	None	No	No	No	6.1	1	Positive

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULT
122	Single Family	1st Floor	Stairwell1	9	B	Stair	Stringer	Wood	White	Intact	None	No	No	No	5.7	1	Positive
128	Single Family	Second	Bedroom2	10	B	Wall	Baseboard	Wood	White	Intact	None	No	No	No	4.2	1	Positive
129	Single Family	Second	Bedroom2	10	B	Door1	Casing	Wood	White	Intact	None	No	No	No	3.3	1	Positive
130	Single Family	Second	Bedroom2	10	B	Door1	Panel	Wood	White	Intact	None	No	No	No	6.4	1	Positive
131	Single Family	Second	Bedroom2	10	B	Door2	Jamb	Wood	White	Intact	None	No	No	No	3	1	Positive
132	Single Family	Second	Bedroom2	10	B	Door2	Casing	Wood	White	Intact	None	No	No	No	3.3	1	Positive
133	Single Family	Second	Bedroom2	10	A	Window	Casing	Wood	White	Intact	None	No	No	No	2.8	1	Positive
134	Single Family	Second	Bedroom2	10	A	Window	Apron	Wood	White	Intact	None	No	No	No	3.1	1	Positive
135	Single Family	Second	Bedroom2	10	D	Window	Apron	Wood	White	Intact	None	No	No	No	3.1	1	Positive
136	Single Family	Second	Bedroom2	10	D	Window	Casing	Wood	White	Intact	None	No	No	No	3	1	Positive
137	Single Family	Second	Bedroom2	10	D	Wall	Shelf	Wood	White	Intact	None	No	No	No	1.7	1	Positive
143	Single Family	Second	Bedroom2	10	B	Closet	Access Panel	Plaster	White	Intact	None	No	No	No	4.5	1	Positive
144	Single Family	Second	Bedroom2	10	B	Closet	Rail	Wood	White	Intact	None	No	No	No	2.9	1	Positive
145	Single Family	Second	Bedroom2	10	B	Closet	Shelf	Wood	White	Intact	None	No	No	No	3.6	1	Positive
151	Single Family	Second	Bedroom4	11	D	Wall	Baseboard	Wood	White	Intact	None	No	No	No	3.3	1	Positive
152	Single Family	Second	Bedroom4	11	D	Door	Jamb	Wood	White	Intact	None	No	No	No	3.4	1	Positive
154	Single Family	Second	Bedroom4	11	D	Window	Apron	Wood	White	Intact	None	No	No	No	2.8	1	Positive
156	Single Family	Second	Bedroom4	11	B	Door	Casing	Wood	White	Intact	None	No	No	No	3.8	1	Positive
159	Single Family	Second	Bedroom4	11	B	Window1	Casing	Wood	White	Intact	None	No	No	No	3.3	1	Positive
161	Single Family	Second	Bedroom4	11	B	Window2	Sash	Wood	White	Intact	None	No	No	No	10.5	1	Positive
163	Single Family	Second	Bedroom4	11	C	Window	Casing	Wood	White	Intact	None	No	No	No	3.1	1	Positive
165	Single Family	Second	Bedroom4	11	C	Door	Jamb	Wood	White	Intact	None	No	No	No	3.6	1	Positive
175	Single Family	Second	Bathroom3	12	C	Wall	Wall	Plaster	White	Intact	None	No	No	No	1	1	Positive
177	Single Family	Second	Bathroom3	12	A	Door	Casing	Wood	White	Intact	None	No	No	No	3.1	1	Positive
179	Single Family	Second	Bathroom3	12	D	Door	Casing	Wood	White	Intact	None	No	No	No	6.8	1	Positive

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULT
180	Single Family	Second	Bathroom3	12	D	Door	Panel	Wood	White	Intact	None	No	No	No	5.5	1	Positive
181	Single Family	Second	Bathroom3	12	C	Window	Casing	Wood	White	Intact	None	No	No	No	3.9	1	Positive
182	Single Family	Second	Bathroom3	12	C	Window	Sill	Wood	White	Intact	None	No	No	No	3.3	1	Positive
183	Single Family	Second	Bathroom3	12	D	Closet	Ceiling	Wood	White	Intact	None	No	No	No	4.5	1	Positive
184	Single Family	Second	Bathroom3	12	D	Closet	A Wall	Wood	White	Intact	None	No	No	No	4.5	1	Positive
185	Single Family	Second	Bathroom3	12	D	Closet	C Wall	Wood	White	Intact	None	No	No	No	5.1	1	Positive
187	Single Family	Second	Bathroom3	12	D	Closet	Rail	Wood	White	Intact	None	No	No	No	1.3	1	Positive
188	Single Family	Second	Bathroom3	12	D	Closet	Drawer	Wood	White	Intact	None	No	No	No	4.8	1	Positive
194	Single Family	Second	Hall	13	A	Door	Casing	Wood	White	Intact	None	No	No	No	8.2	1	Positive
195	Single Family	Second	Hall	13	A	Door	Jamb	Wood	White	Intact	None	No	No	No	7	1	Positive
196	Single Family	Second	Hall	13	B	Door	Jamb	Wood	White	Intact	None	No	No	No	4.2	1	Positive
197	Single Family	Second	Hall	13	B	Door	Panel	Wood	White	Intact	None	No	No	No	3.7	1	Positive
198	Single Family	Second	Hall	13	C	Door1	Panel	Wood	White	Intact	None	No	No	No	2.8	1	Positive
199	Single Family	Second	Hall	13	C	Door1	Stop	Wood	White	Intact	None	No	No	No	3.8	1	Positive
200	Single Family	Second	Hall	13	C	Door2	Casing	Wood	White	Intact	None	No	No	No	4.5	1	Positive
201	Single Family	Second	Hall	13	C	Door2	Rail	Wood	White	Intact	None	No	No	No	3.2	1	Positive
202	Single Family	First	Exterior	14	D	Door	Jamb	Wood	White	Intact	None	No	No	No	25.8	1	Positive

**HUD reporting limits for positive XRF results are ≥ 1.0 mg/cm² (milligrams per square centimeter) for painted or glazed surfaces.*

Water Testing – N/A

RESULTS & RECOMMENDATIONS – N/A

VERIFICATION QUESTIONS & ANSWERS – N/A

BEHAVIORAL PATTERNS – N/A

VISUAL PLUMBING ASSESSMENT – N/A

TABLE W.1: WATER SAMPLE RESULTS – N/A

Inspector Summary

Some windows on this unit are vinyl. Vinyl windows are not warped.

Inspector Certification

The information contained in this report is a true and accurate representation of the conditions and activities at this property at the time of this investigation, based on the professional judgement of the person(s) who conducted and reported this Environmental Investigation. If soil samples were not collected as indicated in Table 4 due to snow, these samples will be collected at the earliest opportunity. An amended report will be sent with any soil hazards found and corrective action options.

Name Donnez Hemphill 02/25/2020

Michigan Certified Lead Inspector/Risk Assessor # P- 05920

Risk Assessor E-Mail: dhemphill@gsgroupmi.com

Appendices

APPENDIX A – RESIDENT INTERVIEW

The purpose of this interview is to help find where to take dust and soil samples. Questions will help find:

- Most frequently used entrances and windows.
- Areas where children sleep, eat, and play.
- Recent renovations.
- Etc.

Resident Interview Questions & Responses:

This house is currently: Occupied
Person interviewed: Byron Boykin
Relationship to child: N/A

FAMILY USE PATTERNS	
QUESTION	**RESPONSE**
Which entrances are used most frequently?	Front Door
Are there floor mats at entrances to the home?	No
Do occupants take shoes off at the door?	No
Which windows are opened most frequently?	Bathroom
Is there a window fan that is used during summer months?	No
Are window air conditioners used? **Is there paint damage from condensate?** ***If yes, what room?***	No No
I need to dust test the window sill in this room for lead. **When was the last time it was wiped down?**	Every Month
Does your family eat food grown in a garden? **Does your child play in this garden?**	No N/A
What cleaning methods do you use at home?	Mopping

OTHER HOUSEHOLD RISK FACTORS	
QUESTION	**RESPONSE**

Do you have a dog, cat, or other pet that could track soil or dust inside?	Yes

Does your child have access to any of the following?

☐ Industrial (big) crayons or markers			
☐ Paints	☐ Detergents	☐ Shellacs	N/A
☐ Dyes	☐ Batteries	☐ Lacquers	
☐ Coloring pigments	☐ Gear oil	☐ Epoxy resins	
☐ Putty	☐ Pipe sealants	☐ Pesticides	

FREQUENT AREAS CHILD VISITS

QUESTION	RESPONSE
Is your child cared for away from home? (This includes preschool and/or child care at a center, dedicated home, or with a friend or relative). **If yes, where?**	N/A

Type of Care	Location of Care / Address	Number of Hours/Week at Location
N/A	N/A	N/A

Where does your child like to sleep, eat, and play?

CHILD	AGE	BEDROOM	EATS	PLAYS INDOORS	PLAYS OUTDOORS
Child 1	Age	Bedroom	Eats where?	Plays where?	Plays where?
N/A	N/A	N/A	N/A	N/A	N/a

CHILD BEHAVIOR RISK FACTORS

QUESTION	RESPONSE
Does your child suck his/her fingers or thumb?	N/A
Does your child put painted objects into their mouth? If yes, what objects?	N/A
Are there any areas of peeling paint on walls, ceilings, stairs, woodwork, furniture or toys?	N/A
Does your child chew on painted surfaces, such as painted cribs, window sills, furniture edges, railings, door moldings, or broom handles?	N/A
Are there bite marks found anywhere in the home, such as child's crib, furniture or window sills?	N/A
Does your child chew or eat paint chips or pick at painted surfaces?	N/A
Does your child put soft metal objects in the mouth? (Ex: pewter, metal toy soldiers, jewelry, gunshot, bullets, beads, fishing sinkers, electronics)	N/A
Does your child put printed material (newspapers, magazines) in their mouth?	N/A
Does your child eat without washing hands before meals or snacks?	N/A

When was the last time the toys were washed? Pacifiers?	N/A
Are there bare soil areas where the child likes to play? Where, specifically?	N/A
On a typical week this past summer, how much time did your child play outside in your yard?	N/A
Has the child been seen eating soil? Where?	N/A

DIETARY RISK FACTORS

QUESTION	RESPONSE
Does your family use imported canned foods?	N/A
Does the family use home remedies, folk medicines or herbal treatments? *Alarcon, Alkohl, Azarcon, Bali Goli, Coral, Ghasard, Greta, Liga, Pay-loo-ah, Rueda, Kohl, Surma or Ceruse*	N/A
Does child take dolomite, oyster shell or bone meal as a calcium or phosphorus supplement?	N/A
Is food prepared, served or stored in glazed ceramic, pewter, crystal, or lead soldered types of containers?	N/A
Does the child have a favorite cup or eating utensil? (If yes, what is it?)	N/A

OCCUPATIONAL/HOBBY RISK FACTORS

QUESTION	RESPONSE
Does anyone living with or caring for the child have an occupation or hobby that could result in lead exposure? Check all that apply:	N/A

- ☐ Auto body/boat (making parts; repairing)
- ☐ Batteries (making; repairing)
- ☐ Bronze polishing
- ☐ Burn painted wood
- ☐ Chemical stripper
- ☐ Construction (bridge/tunnel/highway repair)
- ☐ Construction (power washing older homes)
- ☐ Construction (renovating/remodeling older homes)
- ☐ Construction (wrecking; demolition)
- ☐ Create explosives or ammunition
- ☐ Electronics (making or splicing cable or wire)
- ☐ Electronics (soldering connections)
- ☐ Furniture (refinishing)
- ☐ Glass (leaded glass manufacturing)
- ☐ Pottery or ceramics (making)
- ☐ Radiator repair
- ☐ Use lead shot/bullets
- ☐ Use fishing sinkers
- ☐ Welding, burning, torch/cutting
- ☐ Work at firing range
- ☐ Work in oil refinery

☐ Glass (stained glass making)
☐ Glass (work in glass factory)
☐ Jewelry (making; repairing)
☐ Metal (brass/copper/aluminum processing)
☐ Metal (machining/grinding/melting lead alloys)
☐ Metal (melting for reuse (smelting))
☐ Metal (pouring molten metals: brass, copper, bronze, lead, iron (foundries))
☐ Metal (scrap metal handling/salvaging)
☐ Paint (art)
☐ Paint (manufacturing: non-residential
☐ Paint (removal: sandblasting, scraping, sanding, using heat guns or torches)
☐ Plastic/Rubber (products manufacturing)
☐ Plumber/Pipe fitter

OCCUPATIONAL/HOBBY RISK FACTORS	
QUESTION	RESPONSE
Name:	N/A
Relationship:	N/A
Occupation/Hobby:	N/A
Does the child have access to the area where the activity (occupation or hobby) takes place?	N/A
Are the clothes worn during these activities separated from family laundry?	N/A
Are work/hobby shoes worn into the house?	N/A
Is a vehicle used to commute to and from this activity and home?	N/A
Is the child held or greeted before this person showers, changes clothes or washes hands?	N/A

QUESTION	RESPONSE
Name:	N/A
Relationship:	N/A
Occupation/Hobby:	N/A
Does the child have access to the area where the activity (occupation or hobby takes place?	N/A
Are the clothes worn during these activities separated from family laundry?	N/A
Are work/hobby shoes worn into the house?	N/A

Is a vehicle used to commute to and from this activity and home?	N/A
Is the child held or greeted before this person showers, changes clothes or washes hands?	N/A

APPENDIX B – SITE INFORMATION

B-1: General Property Description:

Bungalow style unit. Bedrooms on first floor.

B-2: Building Condition

Exposure to lead is usually from lead-based paint. Lead-based paint becomes a source of lead exposure when the paint is deteriorated. Deteriorated paint is paint that is chipping or chalking, and may be caused by poor building conditions. A leaky roof is an example of a poor building condition that can cause paint to become deteriorated. Lead work cannot begin before building conditions causing paint to deteriorate are fixed. The building condition survey helps find these areas. "Yes" responses mean the building condition is poor and needs fixing.

BUILDING CONDITION SURVEY QUESTIONS & RESPONSES

GENERAL PROPERTY CONDITION	
QUESTION	**RESPONSE**
What year was this building built?	1925
Has there been any lead testing done to this property within the last year?	No
Were any external renovations done on a neighboring property? Repainting, remodeling, renovation, window replacement, sanding, scraping or power washing painted surfaces inside or outside of the home?	No
Have nearby buildings or structures (bridge, water tower, homes, etc.) recently been repainted, demolished or burned?	No
Were any home renovations done to your home within the past year?	No
Are you planning any building renovations?	Yes To Be Determined
Are you or the landlord planning any landscaping activities?	No
Is building debris stored in the yard?	No
Other notable conditions:	No

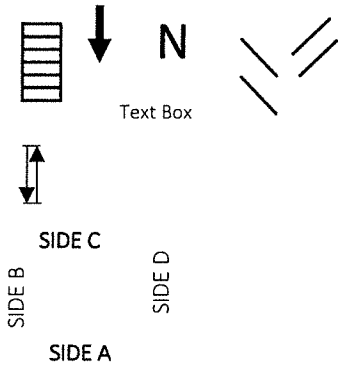
EXTERIOR BUILDING CONDITION	
QUESTION	**RESPONSE**

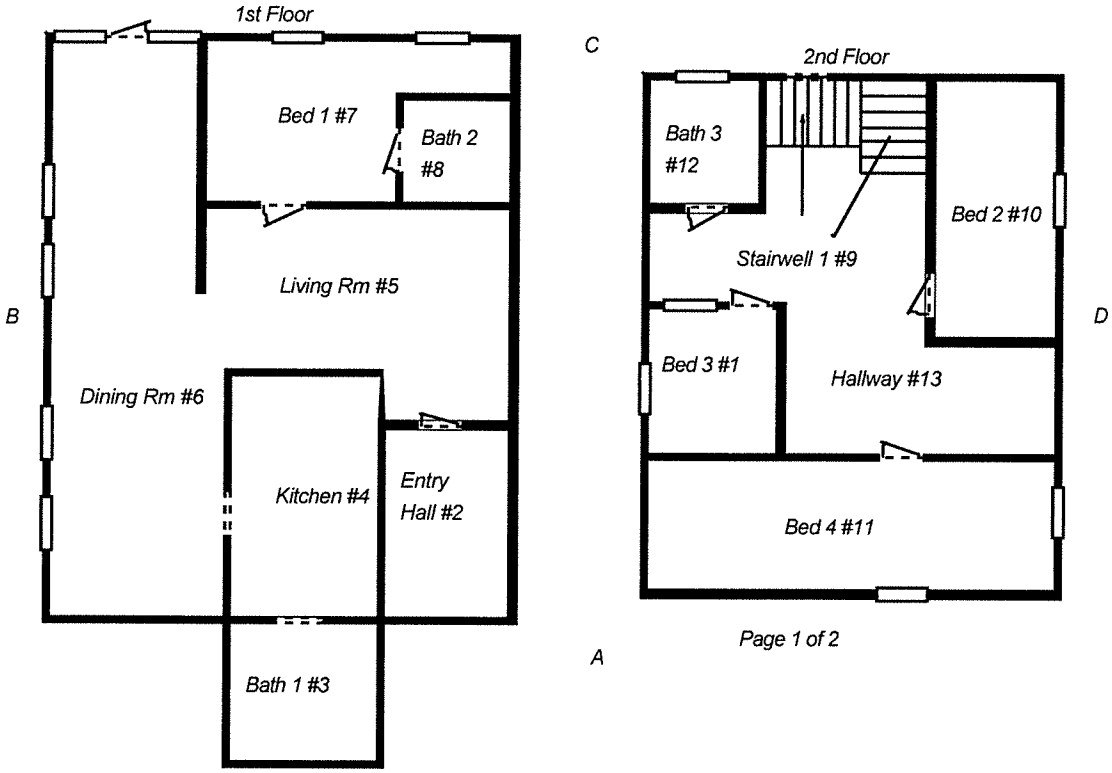
Is exterior siding missing components?	No
Is the roof missing parts?	No
Does the roof have holes or large cracks?	No
Are gutters or downspouts broken?	Yes Wall B
Are there two or more windows or doors missing, broken or boarded up?	No
Does the porch or steps have major cracks, missing materials, structural leans, or is it visibly unsound?	No
Do exterior walls have large cracks, or damage requiring more than routine painting?	No
Does the foundation have damage, structural leans or is it visibly unsound?	No
Are chimney blocks or masonry joints cracked, with loose or missing components, out of plumb or otherwise deteriorated?	No
Other notable conditions:	No

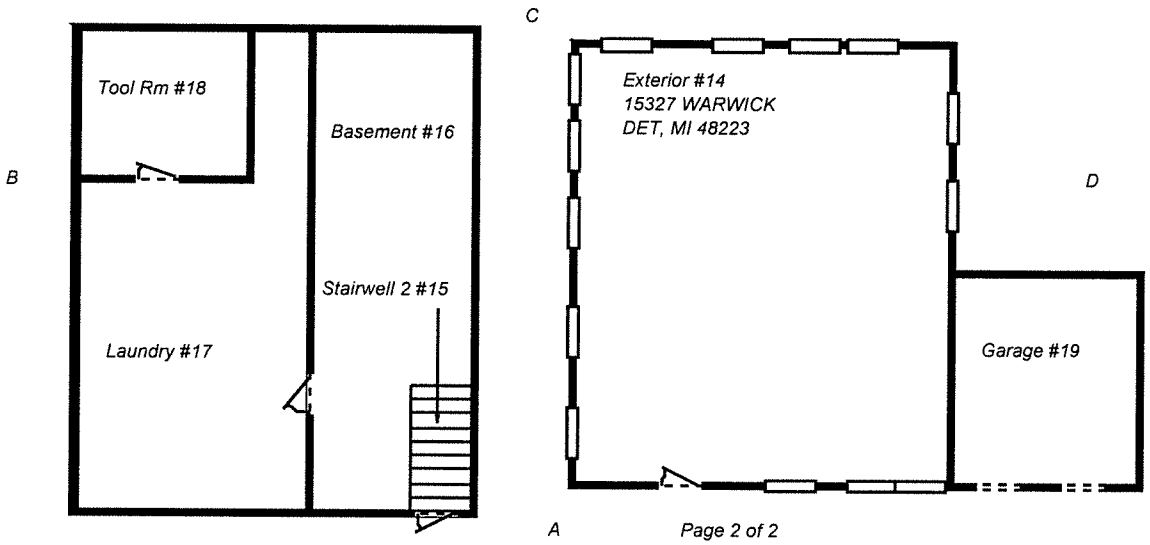
INTERIOR BUILDING CONDITION	
QUESTION	RESPONSE
Has there been any recent water damage in the home?	No
Are there water stains on interior walls or ceilings?	No
Are plaster walls or ceilings deteriorated?	Yes Bathroom 1
Do interior walls have large cracks, or damage requiring more than routine painting?	No
Is there any deteriorated paint in the home?	No
Are vinyl mini blinds present? Does child have access?	No
*Is the bathtub deteriorated? Does the child bathe in it?	No N/A

**Follow MDHHS Residential Lead Hazard Control-Lead in Water Protocol*
Other notable conditions: No

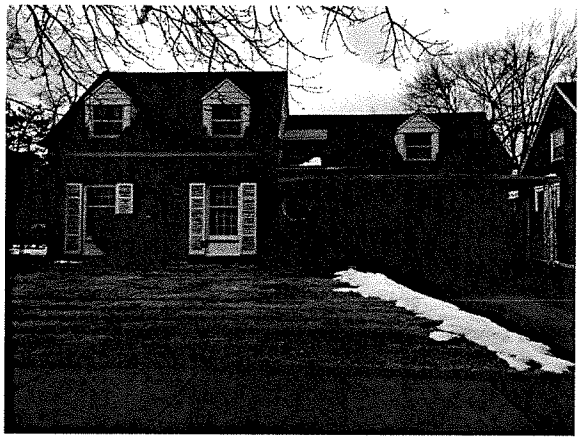
B-3: Floor Plans



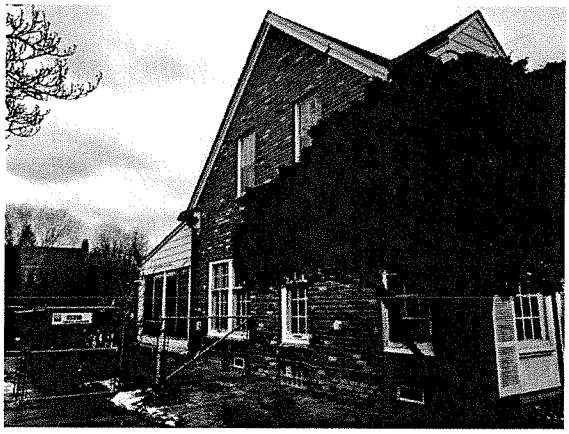

1st Floor
Bed 1 #7
Bath 2
#8
Living Rm #5
Dining Rm #6
Kitchen #4
Entry
Hall #2
Bath 1 #3
B
C
A
2nd Floor
Bath 3
#12
Bed 2 #10
Stairwell 1 #9
Bed 3 #1
Hallway #13
Bed 4 #11
D


C
Tool Rm #18
Basement #16
B
Stairwell 2 #15
Laundry #17
Exterior #14
15327 WARWICK
DET, MI 48223
D
Garage #19
A

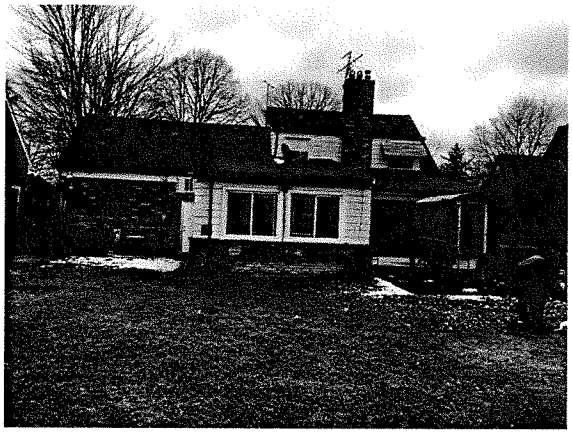
B-4: Photos



Side A



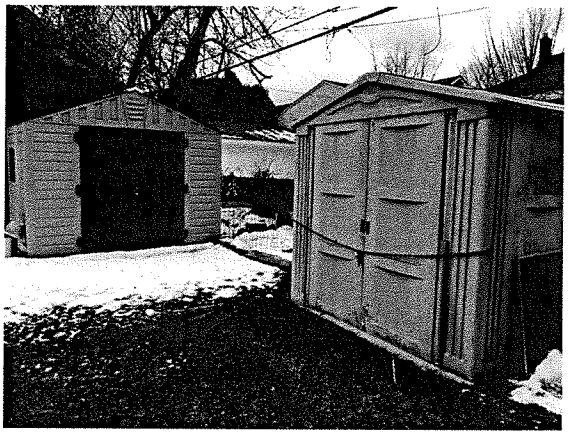
Side B



Side C

Side D

Garage



Shed Not Painted

APPENDIX C – LEAD: EDUCATION, TESTING, RESOURCES & LAWS

C-1: Lead Education

LEAD-BASED PAINT

Lead is a highly toxic metal. When we say paint, it includes:

- Varnishes
- Lacquers
- Stains
- Coatings
- Enamels
- Glazes
- Primers

Lead-based paint is a paint that has lead in it. Lead is used in paint to:

- Brighten the color
- Speed up drying time
- Reduce corrosion (weathering / wear and tear)

Lead was commonly used in household paint in homes built before **1978**. In 1978, the federal government banned the use of lead-based paint in homes (for consumers). The older the home, the more likely it is to have lead-based paint.

Before 1940

 87%

1940 – 1959

 69%

1960 – 1977

 24%

LEAD-HAZARDS

A lead-hazard is when lead is present in a surface and that surface is deteriorating or breaking down. There are specific definitions for different lead-hazards.

- **Lead-Based Paint Hazard** – any lead-based paint, including lead dust and soil that would have an adverse effect on human health.
- **Dust-Lead Hazard** – surface dust in a residence containing an area or mass concentration of lead equal to or in excess of:
    - 10 µg/ft^2 (micrograms per square feet) on floors
    - 40 µg/ft^2 on porches
    - 100 µg/ft^2 on interior window sills
    - 100 µg/ft^2 on window troughs
- **Soil-Lead Hazard** – bare soil (*soil not covered with grass, sod, some other vegetation, or paving, including the sand in sandboxes*) on a residential property that contains lead in excess of:
    - 400 ppm (parts per million) in play areas (*an area of frequent soil contact by children (e.g., sandboxes, swing sets, etc.)*) and vegetable gardens.
    - 1200 ppm in the rest of the yard.

To correct lead-hazards, there are two options:

- **Abatement**
    - The permanent elimination of lead-based paint hazards. This includes:
        - Removal of building components coated with lead-based paint
        - Removal of dust-lead hazards
        - Removal of soil-lead hazards
        - Overlaying soil with durable covering such as asphalt
        - Enclosing lead-based paint hazards
        - Coating lead-based paint hazards with approved encapsulant ("a thick liquid used to cover lead-based paint")
    - This method requires:
        - Preparation
        - Waste disposal
        - Recordkeeping
        - Cleanup
        - Post abatement clearance testing
        - Monitoring (if applicable)
- **Interim Control**
    - A temporary measure to reduce exposure to lead-based paint hazards. This includes, but is not limited to:
        - Preparing and painting lead-based paint hazards
        - Treatment of friction and impact surfaces
        - Specialized cleaning
        - Landscaping over soil-lead hazards (e.g., grass or sod)
        - Monitoring (*conducted by property owner or tenant)*
        - Re-evaluation *(conducted by a certified lead professional)*

For further information, please call MDHHS Healthy Homes Section at 517-335-9390.

LEAD EXPOSURE

Exposure to lead happens during the application, removal and failure of integrity (deterioration) of lead-based paint or from soil lead hazards. Deteriorated paint includes:

- Any paint coating that is peeling, chipping, blistering, flaking, worn, chalking, cracking, or otherwise becoming separated from the painted surface.

Lead-based paint breaks down into:

- **Paint chips** – chips are paint pieces that are detached from the original painted surface. Chips include paint that is peeling, chipping, chalking or cracked.
- **Dust** – dust is created when lead paint is scraped, dry sanded, heated or burned, or when painted surfaces rub together (opening / closing windows and doors). **Dust is the most common source of lead exposure among children.**
    - Dust from lead-based paint can also contaminate the soil. This can be a source of exposure when children play on the ground, or when people bring soil into the house on their shoes.

Lead chips and dust settle on surfaces and objects people touch. Settled lead dust can re-enter the air when people:

- Vacuum or sweep
- When they or their pet walk through it
- When windows or doors are open and allow air to circulate
- When fans circulate air
- Or any other time air is moving in the home

There are **other sources** of lead exposure. Lead is found in products that you may have in your home. These household items include:

- Painted toys; painted furniture
- Toy jewelry; cosmetics (makeup)
- Plumbing products like pipes and fixtures
- Food or liquid containers made of lead crystal or lead-glazed pottery or porcelain

Lead is present for some **jobs and hobbies**. These jobs and hobbies can bring lead home with you on your clothes or hands. Jobs and hobbies include:

- Renovation and painting
- Mining
- Smelting
- Battery recycling
- Refinishing old furniture
- Auto body work
- Shooting ranges
- Hunting (shot)
- Fishing (fishing sinkers and jigs)
- Stained glass (came and solder)
- Stock cars (weights used in stock cars)
- Making pottery (dyes and glazes

To **reduce lead exposure from your job or hobby**:

- Do not put leaded items in your mouth (fishing sinkers, etc.)
- Wash hands before eating or drinking
- Avoid touching your face while working with lead materials
- Change clothes before entering home
- Wash clothes separately from other family members clothes

To **reduce lead exposure in the home**:

- Regularly wash hands, toys, and horizontal surfaces with wet methods. This method of cleaning includes:
    - Washing surfaces with soapy water
    - Using disposable cleaning materials (paper towel)
- Vacuum with a High Efficiency Particulate Air (HEPA) filtered vacuum
- Take shoes off before entering the home or living areas
- Cover lead exposed soil with fruitless plant materials

HEALTH EFFECTS OF LEAD EXPOSURE

Lead is a highly toxic metal. There is no safe level of lead exposure. Lead poisoning occurs when lead enters into the body through either: inhalation (breathing in) or ingestion (eating). Children under the age of six (6) are especially vulnerable to lead poisoning. They have a greater exposure to lead through:

- Frequent hand-to-mouth activity (mouthing objects).
- Consuming more food and drink, and breathing more air per kilogram of body weight than adults.
- Digesting 4-5 times more lead from the gut than adults.
- Nutritional deficiencies, such as an iron deficiency (which increases the bioavailability of lead – meaning it makes lead more available to enter the body).

Children under the age of six (6), their bodies and nervous system is not fully developed. One of the systems lead affects is the nervous system. Lead is a multi-system toxicant, causing:

- Brain and nervous system damage
- Decreased IQ
- Learning difficulties
- Speech, language, and behavior problems
- Hearing problems
- Slow or reduced growth
- Muscle or joint pain
- Reproductive problems (adult)
- Digestive problems
- Kidney damage
- Anemia
- High blood pressure

C-2: Lead Testing Procedures

PAINT

To test for lead in paint, an XRF instrument is used. XRF stands for "X-Ray Fluorescence."

To measure lead, this device uses low level radiation. The radiation excites atoms within painted surfaces. Excitement, or movement of atoms cause radiation to rebound back to the device. This rebound tells the device if lead is present. Lead is determined present if the level is 1 microgram per square centimeter ($\mu g/cm^2$) or more.

Appendix D-2 details the XRF device used.

DUST

Dust is collected using dust wipes. Dust wipes are disposable cloths used to collect dust. The United States Department of Housing and Urban Development (HUD) provides dust wipe best practices. HUD requests inspectors to:

- Use one dust wipe per sample area.
- Collect dust in a measured area. The measured area is 12" x 12" on a floor or a minimum of 14.4 square inches on a window or window trough.
- Open the dust wipe with a gloved hand.
- Perform dust wipe using "S" motions in sample area.
- Put the dust wipe sample into a labeled tube or container.
- Label states property location, sample location, and size of sample area.
- Send samples to trace metals laboratory.

- Report results in micrograms per square foot (µg/ ft^2).

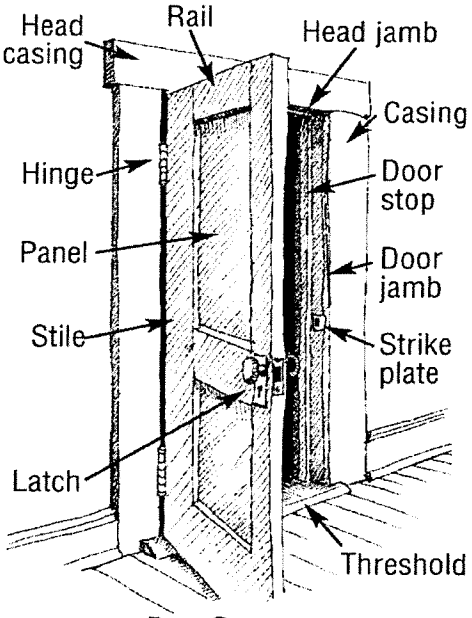
SOIL

Soil is collected using HUD best practices.

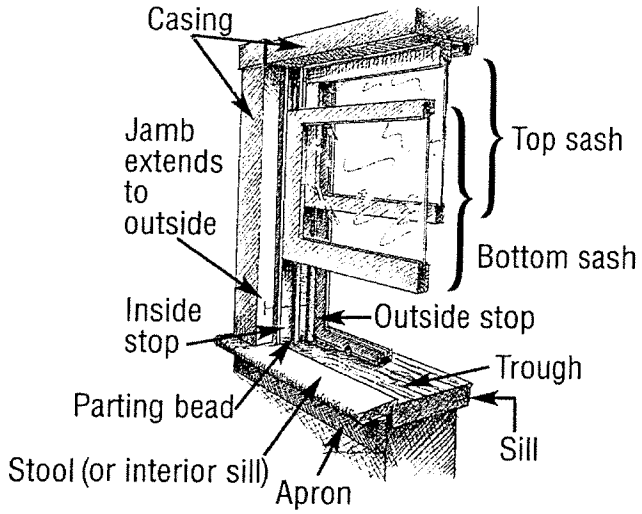
A soil sample comes from the upper ½ inch of soil. Garden soil is tested 4-6" (inches) down. All soil must come from soil on the property. Areas may include sandboxes, child play areas, and the roof drip line. A trace metals laboratory analyzes the soil for lead. Soil sample results are reported in parts per million (ppm).

HOUSING COMPONENT IDENTIFICATION

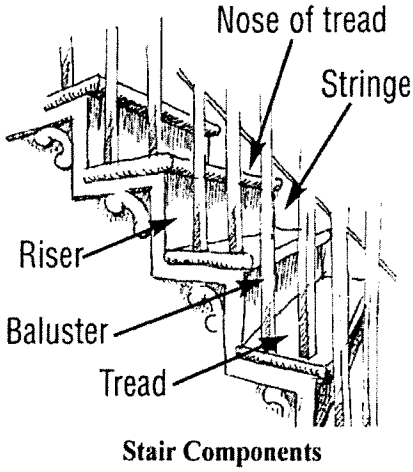
Please use the photos/diagrams below as a guide to help identify housing components noted in this report. Diagrams adopted from Lead Paint Safety: A Field Guide for Painting, Home Maintenance, and Renovation Work, U.S. Department of Housing and Urban Development, Office of Lead Hazard Control, June 1999.



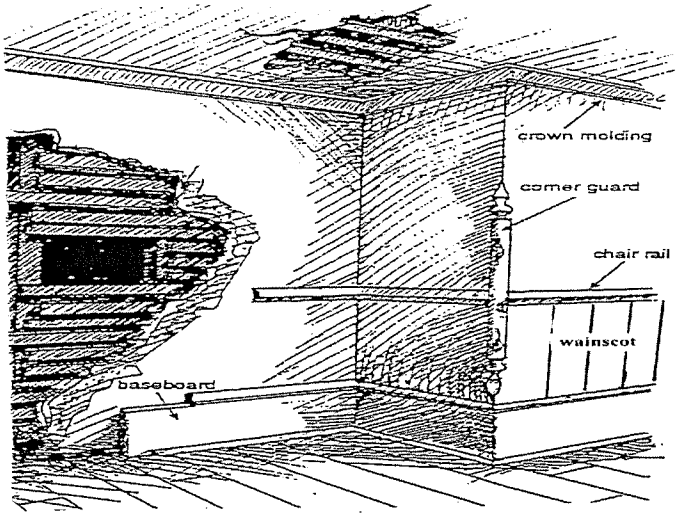
Door Components



Window Components



Stair Components



Wall Components

LEAD HAZARD CORRECTION COST ESTIMATES

Window replacement	$500 - $600
Wood window replacement	$900 - $1200
Window jamb liners	$350 - $500
Siding exterior	$400 - $600 square (square = 100 square feet)
Painting exterior	$275 - $400 square
Exterior door replacement	$750 - $900
Interior door replacement	$300 - $450
Friction/impact door	$250 - $400
E-cap baseboards	$200 - $400 per room
Paint baseboards	$200 - $300 per room
Stair system w/rubber	$400 - $800
Lead cleaning	$100 - $200 per room

C-3: Your Responsibilities

RE-EVALUATION & MONITORING SCHEDULE

Monitor Potential Lead Hazards Two Ways After Abatement/Interim Controls Completed:

Visual Survey: Perform one month and six months after lead hazard work. Perform once each year if no problems found. **Visual survey is completed by homeowner**.

Visual survey includes:

- Looking at painted surfaces known to have lead and see if paint is in good repair.
- Looking at areas lead hazards fixed to see if in good repair.
- Finding problems with the building that could cause new lead hazards.

Re-Evaluate: Every two years **a certified risk assessor** re-evaluates the building.

This includes:

- Measuring dust for lead.
- Measuring soil for lead.
- Assessing potential lead-based paint hazards.

FUTURE OWNERS OF THIS PROPERTY

A summary of this report must be shared with future tenants or owners of a pre-1978 property. Federal law (24 CFR part 35 and 40 CFR part 745) requires this report be shared before they become obligated under a lease or sales contract.

Landlords (lessors) and sellers are required to:

- Distribute an educational pamphlet. This pamphlet is approved from the U.S. Environmental Protection Agency (EPA). The document is: *"Protect Your Family from Lead in Your Home."*
- Include standard warning language in lease or sale contracts. This is to ensure parents have information they need to protect their children from lead hazards.

Contact 800-424-LEAD (5323) for information about your obligations under federal regulations.

NOTICE TO LANDLORDS

Landlord Penalty Law

If a child with an elevated blood lead level is identified in your rental unit you are responsible for ensuring that lead hazards identified in the elevated blood lead level report have been properly addressed. The following must be followed to avoid receiving penalties assessed through the Michigan Lead Abatement Act.

- If you conduct the work on your rental unit you must be certified through the EPA RRP Program or certified through the Michigan Lead Abatement Program. Depending on the method used to correct the hazard, you must follow applicable laws to ensure appropriate work practices are followed.
- Hire a lead abatement contractor, please see the certified list, located at www.michigan.gov/leadsafe.
- Check eligibility for work through the Lead Safe Home Program, please see webpage for details.

Any questions regarding compliance with the Landlord Penalty Act please email HHSInfo@michigan.gov or call 517-335-9390.

APPENDIX D – ALL XRF RESULTS & DEVICE USED

D-1: Results

ALL XRF RESULTS

TABLE 8: ALL XRF RESULTS

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULT
1	Calibration	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	1	1	Positive
2	Calibration	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	1	1	Positive
3	Calibration	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	1	1	Positive
4	Calibration	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	0	1	Negative
5	Calibration	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	0	1	Negative
6	Calibration	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	0	1	Negative
7	Single Family	2nd Floor	Bedroom 3	1	N/A	Ceiling	Ceiling	Plaster	White	Intact	None	No	No	No	0.6	1	Negative
8	Single Family	2nd Floor	Bedroom 3	1	A	Wall	Wall	Plaster	Pink	Intact	None	No	No	No	0.1	1	Negative
9	Single Family	2nd Floor	Bedroom 3	1	B	Wall	Wall	Plaster	Pink	Intact	None	No	No	No	0.2	1	Negative
10	Single Family	2nd Floor	Bedroom 3	1	C	Wall	Wall	Plaster	Pink	Intact	None	No	No	No	0	1	Negative
11	Single Family	2nd Floor	Bedroom 3	1	D	Wall	Wall	Plaster	Pink	Intact	None	No	No	No	0.1	1	Negative
12	Single Family	2nd Floor	Bedroom 3	1	D	Wall	Baseboard	Wood	White	Intact	None	No	No	No	2.7	1	Positive
13	Single Family	2nd Floor	Bedroom 3	1	D	Floor	Floor	Wood	Varnish	Intact	None	No	No	No	-0.1	1	Negative
14	Single Family	2nd Floor	Bedroom 3	1	D	Window	Casing	Wood	White	Intact	None	No	No	No	3.9	1	Positive
15	Single Family	2nd Floor	Bedroom 3	1	D	Window	Sash	Wood	White	Intact	None	No	No	No	7.5	1	Positive
16	Single Family	2nd Floor	Bedroom 3	1	A	Window	Sill	Wood	White	Deteriorated	Substrate	No	No	No	4.8	1	Positive
17	Single Family	2nd Floor	Bedroom 3	1	A	Window	Jamb	Wood	White	Intact	None	No	No	No	1.4	1	Positive
18	Single Family	2nd Floor	Bedroom 3	1	A	Door	Casing	Wood	White	Intact	None	No	No	No	4.1	1	Positive
19	Single Family	2nd Floor	Bedroom 3	1	A	Door	Panel	Wood	White	Intact	None	No	No	No	7.8	1	Positive

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULT
20	Single Family	2nd Floor	Bedroom 3	1	A	Closet	Ceiling	Plaster	White	Intact	None	No	No	No	0.4	1	Negative
21	Single Family	2nd Floor	Bedroom 3	1	A	Closet	A Wall	Plaster	White	Intact	None	No	No	No	0.5	1	Negative
22	Single Family	2nd Floor	Bedroom 3	1	A	Closet	B Wall	Plaster	White	Intact	None	No	No	No	0.3	1	Negative
23	Single Family	2nd Floor	Bedroom 3	1	A	Closet	C Wall	Plaster	White	Intact	None	No	No	No	0.3	1	Negative
24	Single Family	2nd Floor	Bedroom 3	1	A	Closet	D Wall	Plaster	White	Intact	None	No	No	No	0.6	1	Negative
25	Single Family	2nd Floor	Bedroom 3	1	A	Closet	Shelf	Wood	White	Intact	None	No	No	No	2.8	1	Positive
26	Single Family	2nd Floor	Bedroom 3	1	A	Closet	Rail	Wood	White	Intact	None	No	No	No	3.1	1	Positive
27	Single Family	2nd Floor	Bedroom 3	1	A	Closet	Chute	Wood	White	Intact	None	No	No	No	6.2	1	Positive
28	Single Family	2nd Floor	Bedroom 3	1	C	Door	Jamb	Wood	White	Intact	None	No	No	No	3.3	1	Positive
29	Single Family	2nd Floor	Bedroom 3	1	C	Door	Casing	Wood	White	Deteriorated	Substrate	No	No	No	4.1	1	Positive
30	Single Family	2nd Floor	Bedroom 3	1	C	Door	Panel	Wood	White	Deteriorated	Substrate	No	No	No	3.2	1	Positive
31	Single Family	1st Floor	Entry Hall	2	N/A	Ceiling	Ceiling	Plaster	White	Intact	None	No	No	No	1	1	Positive
32	Single Family	1st Floor	Entry Hall	2	A	Wall	Wall	Plaster	Tan	Intact	None	No	No	No	0.2	1	Negative
33	Single Family	1st Floor	Entry Hall	2	B	Wall	Wall	Plaster	White	Intact	None	No	No	No	-0.1	1	Negative
34	Single Family	1st Floor	Entry Hall	2	C	Wall	Wall	Plaster	White	Intact	None	No	No	No	0.4	1	Negative
35	Single Family	1st Floor	Entry Hall	2	D	Wall	Wall	Plaster	White	Intact	None	No	No	No	0.4	1	Negative
36	Single Family	1st Floor	Entry Hall	2	D	Wall	Baseboard	Wood	White	Intact	None	No	No	No	3.6	1	Positive
37	Single Family	1st Floor	Entry Hall	2	D	Door1	Casing	Wood	White	Intact	None	No	No	No	0	1	Negative
38	Single Family	1st Floor	Entry Hall	2	D	Door1	Stop	Wood	White	Intact	None	No	No	No	-0.1	1	Negative
39	Single Family	1st Floor	Entry Hall	2	D	Door2	Casing	Wood	White	Intact	None	No	No	No	3.7	1	Positive
40	Single Family	1st Floor	Entry Hall	2	A	Door	Casing	Wood	White	Intact	None	No	No	No	3.3	1	Positive
41	Single Family	1st Floor	Entry Hall	2	A	Door	Panel	Wood	White	Intact	None	No	No	No	6.6	1	Positive
42	Single Family	1st Floor	Entry Hall	2	A	Door1	Casing	Wood	White	Intact	None	No	No	No	3.2	1	Positive
43	Single Family	1st Floor	Entry Hall	2	B	Door1	Jamb	Wood	White	Intact	None	No	No	No	4.6	1	Positive
44	Single Family	1st Floor	Entry Hall	2	B	Door2	Jamb	Wood	White	Intact	None	No	No	No	0.6	1	Negative

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULT
45	Single Family	1st Floor	Entry Hall	2	B	Door2	Casing	Wood	White	Intact	None	No	No	No	4	1	Positive
46	Single Family	1st Floor	Entry Hall	2	B	Door3	Casing	Wood	White	Intact	None	No	No	No	3.5	1	Positive
47	Single Family	1st Floor	Entry Hall	2	B	Door3	Jamb	Wood	White	Intact	None	No	No	No	3.4	1	Positive
48	Single Family	1st Floor	Entry Hall	2	B	Closet	Ceiling	Plaster	White	Intact	None	No	No	No	6.9	1	Positive
49	Single Family	1st Floor	Entry Hall	2	B	Closet	A Wall	Plaster	White	Intact	None	No	No	No	0.5	1	Negative
50	Single Family	1st Floor	Entry Hall	2	B	Closet	B Wall	Plaster	White	Intact	None	No	No	No	0.5	1	Negative
51	Single Family	1st Floor	Entry Hall	2	B	Closet	Rail	Wood	White	Intact	None	No	No	No	2.8	1	Positive
52	Single Family	1st Floor	Entry Hall	2	B	Closet	Shelf	Wood	White	Intact	None	No	No	No	1.2	1	Positive
53	Single Family	1st Floor	Bathroom1	3	N/A	Ceiling	Ceiling	Plaster	White	Deteriorated	Substrate	No	No	No	0.8	1	Negative
54	Single Family	1st Floor	Bathroom1	3	A	Wall	Wall	Plaster	White	Deteriorated	Substrate	No	No	No	0.7	1	Negative
55	Single Family	1st Floor	Bathroom1	3	B	Wall	Wall	Plaster	White	Deteriorated	Substrate	No	No	No	0.8	1	Negative
56	Single Family	1st Floor	Bathroom1	3	C	Wall	Wall	Plaster	White	Deteriorated	Substrate	No	No	No	0.7	1	Negative
57	Single Family	1st Floor	Bathroom1	3	A	Window	Casing	Wood	White	Intact	None	No	No	No	3.5	1	Positive
58	Single Family	1st Floor	Bathroom1	3	A	Window	Sash	Wood	White	Intact	None	No	No	No	10.8	1	Positive
59	Single Family	1st Floor	Bathroom1	3	C	Door	Casing	Wood	White	Intact	None	No	No	No	7.2	1	Positive
60	Single Family	1st Floor	Bathroom1	3	C	Door	Stop	Wood	White	Intact	None	No	No	No	5.9	1	Positive
61	Single Family	1st Floor	Kitchen	4	N/A	Ceiling	Ceiling	Plaster	White	Intact	None	No	No	No	0.8	1	Negative
62	Single Family	1st Floor	Kitchen	4	A	Wall	Wall	Plaster	Gray	Intact	None	No	No	No	1	1	Positive
63	Single Family	1st Floor	Kitchen	4	B	Wall	Wall	Plaster	Gray	Intact	None	No	No	No	0	1	Negative
64	Single Family	1st Floor	Kitchen	4	C	Wall	Wall	Plaster	Gray	Intact	None	No	No	No	0.7	1	Negative
65	Single Family	1st Floor	Kitchen	4	D	Wall	Wall	Plaster	Gray	Intact	None	No	No	No	1	1	Positive
66	Single Family	1st Floor	Kitchen	4	D	Wall	Baseboard	Wood	White	Intact	None	No	No	No	4.5	1	Positive
67	Single Family	1st Floor	Kitchen	4	D	Door	Casing	Wood	White	Intact	None	No	No	No	0.2	1	Negative
68	Single Family	1st Floor	Kitchen	4	D	Door	Jamb	Wood	White	Intact	None	No	No	No	4.3	1	Positive
69	Single Family	1st Floor	Kitchen	4	A	Cabinet	Door	Wood	White	Intact	None	No	No	No	0.1	1	Negative

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULT
70	Single Family	1st Floor	Kitchen	4	A	Window	Casing	Wood	White	Intact	None	No	No	No	4.6	1	Positive
71	Single Family	1st Floor	Kitchen	4	A	Window	Sill	Wood	White	Intact	None	No	No	No	3.3	1	Positive
72	Single Family	1st Floor	Kitchen	4	D	Cabinet	Door	Wood	White	Intact	None	No	No	No	0	1	Negative
73	Single Family	1st Floor	Kitchen	4	D	Cabinet	Stile	Wood	White	Intact	None	No	No	No	9.1	1	Positive
74	Single Family	1st Floor	Kitchen	4	D	Cabinet	Drawer	Wood	White	Intact	None	No	No	No	-0.1	1	Negative
75	Single Family	1st Floor	Living Room	5	N/A	Ceiling	Ceiling	Plaster	White	Intact	None	No	No	No	0.3	1	Negative
76	Single Family	1st Floor	Living Room	5	A	Wall	Wall	Plaster	Red	Intact	None	No	No	No	0.3	1	Negative
77	Single Family	1st Floor	Living Room	5	B	Wall	Wall	Plaster	White	Intact	None	No	No	No	0.3	1	Negative
78	Single Family	1st Floor	Living Room	5	C	Wall	Wall	Plaster	White	Intact	None	No	No	No	0.5	1	Negative
79	Single Family	1st Floor	Living Room	5	D	Wall	Wall	Plaster	White	Intact	None	No	No	No	0.5	1	Negative
80	Single Family	1st Floor	Living Room	5	C	Door	Casing	Plaster	White	Intact	None	No	No	No	7.7	1	Positive
81	Single Family	1st Floor	Living Room	5	C	Door	Stile	Plaster	White	Intact	None	No	No	No	5	1	Positive
82	Single Family	1st Floor	Living Room	5	C	Fireplace	Mantle	Wood	White	Intact	None	No	No	No	10.1	1	Positive
83	Single Family	1st Floor	Living Room	5	A	Door	Casing	Wood	White	Intact	None	No	No	No	4.9	1	Positive
84	Single Family	1st Floor	Living Room	5	C	Door	Casing	Wood	White	Intact	None	No	No	No	0	1	Negative
85	Single Family	1st Floor	Living Room	5	C	Door	Stop	Wood	White	Intact	None	No	No	No	0.1	1	Negative
86	Single Family	1st Floor	Dining Rm	6	B	Window2	Stop	Wood	White	Intact	None	No	No	No	5.6	1	Positive
87	Single Family	1st Floor	Dining Rm	6	B	Window2	Casing	Wood	White	Intact	None	No	No	No	7.6	1	Positive
88	Single Family	1st Floor	Dining Rm	6	B	Window1	Casing	Wood	White	Intact	None	No	No	No	5.2	1	Positive
89	Single Family	1st Floor	Dining Rm	6	B	Window1	Sash	Wood	White	Intact	None	No	No	No	8.5	1	Positive
90	Single Family	1st Floor	Dining Rm	6	A	Wall	Vent	Metal	White	Intact	None	No	No	No	0.2	1	Negative
91	Single Family	1st Floor	Dining Rm	6	N/A	Floor	Floor	Wood	Varnish	Intact	None	No	No	No	0	1	Negative
92	Single Family	1st Floor	Bedroom1	7	N/A	Ceiling	Ceiling	Plaster	White	Intact	None	No	No	No	0.1	1	Negative
93	Single Family	1st Floor	Bedroom1	7	A	Wall	Wall	Plaster	Teal	Intact	None	No	No	No	0.1	1	Negative
94	Single Family	1st Floor	Bedroom1	7	B	Wall	Wall	Plaster	Teal	Intact	None	No	No	No	0.1	1	Negative

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULT
95	Single Family	1st Floor	Bedroom1	7	C	Wall	Wall	Plaster	Teal	Intact	None	No	No	No	0.2	1	Negative
96	Single Family	1st Floor	Bedroom1	7	D	Wall	Wall	Plaster	Teal	Intact	None	No	No	No	0	1	Negative
97	Single Family	1st Floor	Bedroom1	7	C	Window	Casing	Wood	White	Intact	None	No	No	No	0	1	Negative
98	Single Family	1st Floor	Bedroom1	7	C	Window	Sill	Wood	White	Intact	None	No	No	No	-0.1	1	Negative
99	Single Family	1st Floor	Bedroom1	7	D	Window	Sill	Wood	White	Intact	None	No	No	No	0	1	Negative
100	Single Family	1st Floor	Bedroom1	7	B	Door	Casing	Wood	White	Intact	None	No	No	No	0	1	Negative
101	Single Family	1st Floor	Bedroom1	7	B	Door	Panel	Wood	Varnish	Intact	None	No	No	No	0	1	Negative
102	Single Family	1st Floor	Bedroom1	7	D	Door	Casing	Wood	Varnish	Intact	None	No	No	No	-0.1	1	Negative
103	Single Family	1st Floor	Bedroom1	7	A	Door1	Casing	Wood	White	Intact	None	No	No	No	0	1	Negative
104	Single Family	1st Floor	Bedroom1	7	A	Door2	Casing	Wood	White	Intact	None	No	No	No	-0.1	1	Negative
105	Single Family	1st Floor	Bathroom2	8	N/A	Ceiling	Ceiling	Plaster	Gray	Intact	None	No	No	No	0.2	1	Negative
106	Single Family	1st Floor	Bathroom2	8	A	Wall	Wall	Plaster	Gray	Intact	None	No	No	No	0.2	1	Negative
107	Single Family	1st Floor	Bathroom2	8	B	Wall	Wall	Plaster	Gray	Intact	None	No	No	No	0.2	1	Negative
108	Single Family	1st Floor	Bathroom2	8	C	Wall	Wall	Plaster	Gray	Intact	None	No	No	No	0.1	1	Negative
109	Single Family	1st Floor	Bathroom2	8	D	Wall	Wall	Plaster	Gray	Intact	None	No	No	No	0.3	1	Negative
110	Single Family	1st Floor	Bathroom2	8	B	Door	Casing	Wood	Beige	Intact	None	No	No	No	-0.1	1	Negative
111	Single Family	1st Floor	Bathroom2	8	B	Door	Jamb	Wood	Beige	Intact	None	No	No	No	-0.2	1	Negative
112	Single Family	1st Floor	Stairwell1	9	N/A	Ceiling	Ceiling	Plaster	White	Intact	None	No	No	No	-0.1	1	Negative
113	Single Family	1st Floor	Stairwell1	9	A	Wall	Wall	Plaster	White	Intact	None	No	No	No	-0.1	1	Negative
114	Single Family	1st Floor	Stairwell1	9	B	Wall	Wall	Plaster	White	Intact	None	No	No	No	0.2	1	Negative
115	Single Family	1st Floor	Stairwell1	9	C	Wall	Wall	Plaster	White	Intact	None	No	No	No	0.3	1	Negative
116	Single Family	1st Floor	Stairwell1	9	D	Wall	Wall	Plaster	White	Intact	None	No	No	No	0.3	1	Negative
117	Single Family	1st Floor	Stairwell1	9	D	Wall	Baseboard	Wood	White	Intact	None	No	No	No	6.8	1	Positive
118	Single Family	1st Floor	Stairwell1	9	C	Window	Casing	Wood	White	Intact	None	No	No	No	0	1	Negative
119	Single Family	1st Floor	Stairwell1	9	B	Stair	Baluster	Wood	White	Intact	None	No	No	No	-0.1	1	Negative

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULT
120	Single Family	1st Floor	Stairwell1	9	B	Stair	Tread	Wood	White	Intact	None	No	No	No	0.1	1	Negative
121	Single Family	1st Floor	Stairwell1	9	B	Stair	Riser	Wood	White	Intact	None	No	No	No	6.1	1	Positive
122	Single Family	1st Floor	Stairwell1	9	B	Stair	Stringer	Wood	White	Intact	None	No	No	No	5.7	1	Positive
123	Single Family	Second	Bedroom2	10	N/A	Ceiling	Ceiling	Plaster	White	Intact	None	No	No	No	0.3	1	Negative
124	Single Family	Second	Bedroom2	10	A	Wall	Wall	Plaster	Orange	Intact	None	No	No	No	-0.3	1	Negative
125	Single Family	Second	Bedroom2	10	B	Wall	Wall	Plaster	Orange	Intact	None	No	No	No	0.6	1	Negative
126	Single Family	Second	Bedroom2	10	C	Wall	Wall	Plaster	Orange	Intact	None	No	No	No	0.3	1	Negative
127	Single Family	Second	Bedroom2	10	D	Wall	Wall	Plaster	Orange	Intact	None	No	No	No	0.2	1	Negative
128	Single Family	Second	Bedroom2	10	B	Wall	Baseboard	Wood	White	Intact	None	No	No	No	4.2	1	Positive
129	Single Family	Second	Bedroom2	10	B	Door1	Casing	Wood	White	Intact	None	No	No	No	3.3	1	Positive
130	Single Family	Second	Bedroom2	10	B	Door1	Panel	Wood	White	Intact	None	No	No	No	6.4	1	Positive
131	Single Family	Second	Bedroom2	10	B	Door2	Jamb	Wood	White	Intact	None	No	No	No	3	1	Positive
132	Single Family	Second	Bedroom2	10	B	Door2	Casing	Wood	White	Intact	None	No	No	No	3.3	1	Positive
133	Single Family	Second	Bedroom2	10	A	Window	Casing	Wood	White	Intact	None	No	No	No	2.8	1	Positive
134	Single Family	Second	Bedroom2	10	A	Window	Apron	Wood	White	Intact	None	No	No	No	3.1	1	Positive
135	Single Family	Second	Bedroom2	10	D	Window	Apron	Wood	White	Intact	None	No	No	No	3.1	1	Positive
136	Single Family	Second	Bedroom2	10	D	Window	Casing	Wood	White	Intact	None	No	No	No	3	1	Positive
137	Single Family	Second	Bedroom2	10	D	Wall	Shelf	Wood	White	Intact	None	No	No	No	1.7	1	Positive
138	Single Family	Second	Bedroom2	10	B	Closet	Ceiling	Plaster	White	Intact	None	No	No	No	0.3	1	Negative
139	Single Family	Second	Bedroom2	10	B	Closet	A Wall	Plaster	White	Intact	None	No	No	No	0.3	1	Negative
140	Single Family	Second	Bedroom2	10	B	Closet	B Wall	Plaster	White	Intact	None	No	No	No	0.3	1	Negative
141	Single Family	Second	Bedroom2	10	B	Closet	C Wall	Plaster	White	Intact	None	No	No	No	0.3	1	Negative
142	Single Family	Second	Bedroom2	10	B	Closet	D Wall	Plaster	White	Intact	None	No	No	No	0.6	1	Negative
143	Single Family	Second	Bedroom2	10	B	Closet	Access Panel	Plaster	White	Intact	None	No	No	No	4.5	1	Positive
144	Single Family	Second	Bedroom2	10	B	Closet	Rail	Wood	White	Intact	None	No	No	No	2.9	1	Positive

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULT
145	Single Family	Second	Bedroom2	10	B	Closet	Shelf	Wood	White	Intact	None	No	No	No	3.6	1	Positive
146	Single Family	Second	Bedroom4	11	N/A	Ceiling	Ceiling	Plaster	White	Intact	None	No	No	No	0	1	Negative
147	Single Family	Second	Bedroom4	11	A	Wall	Wall	Plaster	White	Intact	None	No	No	No	0.4	1	Negative
148	Single Family	Second	Bedroom4	11	B	Wall	Wall	Plaster	White	Intact	None	No	No	No	-0.4	1	Negative
149	Single Family	Second	Bedroom4	11	C	Wall	Wall	Plaster	White	Intact	None	No	No	No	0.4	1	Negative
150	Single Family	Second	Bedroom4	11	D	Wall	Wall	Plaster	White	Intact	None	No	No	No	0.3	1	Negative
151	Single Family	Second	Bedroom4	11	D	Wall	Baseboard	Wood	White	Intact	None	No	No	No	3.3	1	Positive
152	Single Family	Second	Bedroom4	11	D	Door	Jamb	Wood	White	Intact	None	No	No	No	3.4	1	Positive
153	Single Family	Second	Bedroom4	11	D	Door	Panel	Wood	White	Intact	None	No	No	No	0.6	1	Negative
154	Single Family	Second	Bedroom4	11	D	Window	Apron	Wood	White	Intact	None	No	No	No	2.8	1	Positive
155	Single Family	Second	Bedroom4	11	D	Window	Sill	Wood	White	Deteriorated	Substrate	No	No	No	2.6	1	Positive
156	Single Family	Second	Bedroom4	11	B	Door	Casing	Wood	White	Intact	None	No	No	No	3.8	1	Positive
157	Single Family	Second	Bedroom4	11	B	Door	Jamb	Wood	White	Deteriorated	Substrate	No	No	No	0.1	1	Negative
158	Single Family	Second	Bedroom4	11	B	Window1	Sash	Wood	White	Deteriorated	Substrate	No	No	No	9.7	1	Positive
159	Single Family	Second	Bedroom4	11	B	Window1	Casing	Wood	White	Intact	None	No	No	No	3.3	1	Positive
160	Single Family	Second	Bedroom4	11	B	Window2	Sill	Wood	White	Deteriorated	Substrate	No	No	No	2.2	1	Positive
161	Single Family	Second	Bedroom4	11	B	Window2	Sash	Wood	White	Intact	None	No	No	No	10.5	1	Positive
162	Single Family	Second	Bedroom4	11	C	Window	Sill	Wood	White	Deteriorated	Substrate	No	No	No	3.4	1	Positive
163	Single Family	Second	Bedroom4	11	C	Window	Casing	Wood	White	Intact	None	No	No	No	3.1	1	Positive
164	Single Family	Second	Bedroom4	11	C	Door	Casing	Wood	White	Deteriorated	Substrate	No	No	No	3.7	1	Positive
165	Single Family	Second	Bedroom4	11	C	Door	Jamb	Wood	White	Intact	None	No	No	No	3.6	1	Positive
166	Single Family	Second	Bedroom4	11	C	Closet	Ceiling	Plaster	White	Intact	None	No	No	No	0.5	1	Negative
167	Single Family	Second	Bedroom4	11	C	Closet	A Wall	Plaster	White	Intact	None	No	No	No	0.5	1	Negative
168	Single Family	Second	Bedroom4	11	C	Closet	B Wall	Plaster	White	Intact	None	No	No	No	0.4	1	Negative
169	Single Family	Second	Bedroom4	11	C	Closet	C Wall	Plaster	White	Intact	None	No	No	No	0.2	1	Negative

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULT
170	Single Family	Second	Bedroom4	11	C	Closet	D Wall	Plaster	White	Intact	None	No	No	No	0.4	1	Negative
171	Single Family	Second	Bedroom4	11	C	Closet	Shelf	Wood	White	Intact	None	No	No	No	0.2	1	Negative
172	Single Family	Second	Bathroom3	12	N/A	Ceiling	Ceiling	Plaster	White	Intact	None	No	No	No	0.9	1	Negative
173	Single Family	Second	Bathroom3	12	A	Wall	Wall	Plaster	White	Intact	None	No	No	No	0.7	1	Negative
174	Single Family	Second	Bathroom3	12	B	Wall	Wall	Plaster	White	Intact	None	No	No	No	0.7	1	Negative
175	Single Family	Second	Bathroom3	12	C	Wall	Wall	Plaster	White	Intact	None	No	No	No	1	1	Positive
176	Single Family	Second	Bathroom3	12	D	Wall	Wall	Plaster	White	Intact	None	No	No	No	0.7	1	Negative
177	Single Family	Second	Bathroom3	12	A	Door	Casing	Wood	White	Intact	None	No	No	No	3.1	1	Positive
178	Single Family	Second	Bathroom3	12	A	Door	Jamb	Wood	White	Intact	None	No	No	No	0.1	1	Negative
179	Single Family	Second	Bathroom3	12	D	Door	Casing	Wood	White	Intact	None	No	No	No	6.8	1	Positive
180	Single Family	Second	Bathroom3	12	D	Door	Panel	Wood	White	Intact	None	No	No	No	5.5	1	Positive
181	Single Family	Second	Bathroom3	12	C	Window	Casing	Wood	White	Intact	None	No	No	No	3.9	1	Positive
182	Single Family	Second	Bathroom3	12	C	Window	Sill	Wood	White	Intact	None	No	No	No	3.3	1	Positive
183	Single Family	Second	Bathroom3	12	D	Closet	Ceiling	Wood	White	Intact	None	No	No	No	4.5	1	Positive
184	Single Family	Second	Bathroom3	12	D	Closet	A Wall	Wood	White	Intact	None	No	No	No	4.5	1	Positive
185	Single Family	Second	Bathroom3	12	D	Closet	C Wall	Wood	White	Intact	None	No	No	No	5.1	1	Positive
186	Single Family	Second	Bathroom3	12	D	Closet	D Wall	Wood	White	Intact	None	No	No	No	0.4	1	Negative
187	Single Family	Second	Bathroom3	12	D	Closet	Rail	Wood	White	Intact	None	No	No	No	1.3	1	Positive
188	Single Family	Second	Bathroom3	12	D	Closet	Drawer	Wood	White	Intact	None	No	No	No	4.8	1	Positive
189	Single Family	Second	Hall	13	N/A	Ceiling	Ceiling	Plaster	White	Intact	None	No	No	No	0.8	1	Negative
190	Single Family	Second	Hall	13	A	Wall	Wall	Plaster	White	Intact	None	No	No	No	0.3	1	Negative
191	Single Family	Second	Hall	13	B	Wall	Wall	Plaster	White	Intact	None	No	No	No	0.5	1	Negative
192	Single Family	Second	Hall	13	C	Wall	Wall	Plaster	White	Intact	None	No	No	No	0.4	1	Negative
193	Single Family	Second	Hall	13	D	Wall	Wall	Plaster	White	Intact	None	No	No	No	0.5	1	Negative
194	Single Family	Second	Hall	13	A	Door	Casing	Wood	White	Intact	None	No	No	No	8.2	1	Positive

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULT
195	Single Family	Second	Hall	13	A	Door	Jamb	Wood	White	Intact	None	No	No	No	7	1	Positive
196	Single Family	Second	Hall	13	B	Door	Jamb	Wood	White	Intact	None	No	No	No	4.2	1	Positive
197	Single Family	Second	Hall	13	B	Door	Panel	Wood	White	Intact	None	No	No	No	3.7	1	Positive
198	Single Family	Second	Hall	13	C	Door1	Panel	Wood	White	Intact	None	No	No	No	2.8	1	Positive
199	Single Family	Second	Hall	13	C	Door1	Stop	Wood	White	Intact	None	No	No	No	3.8	1	Positive
200	Single Family	Second	Hall	13	C	Door2	Casing	Wood	White	Intact	None	No	No	No	4.5	1	Positive
201	Single Family	Second	Hall	13	C	Door2	Rail	Wood	White	Intact	None	No	No	No	3.2	1	Positive
202	Single Family	First	Exterior	14	D	Door	Jamb	Wood	White	Intact	None	No	No	No	25.8	1	Positive
203	Single Family	First	Exterior	14	D	Door	Casing	Wood	White	Deteriorated	Moisture	No	No	No	29	1	Positive
204	Single Family	First	Exterior	14	A	Wall	Address Plate	Wood	White	Deteriorated	Moisture	No	No	No	16.8	1	Positive
205	Single Family	First	Exterior	14	A	Window1	Sash	Wood	White	Deteriorated	Moisture	No	No	No	8.9	1	Positive
206	Single Family	First	Exterior	14	A	Window1	Stop	Wood	White	Deteriorated	Moisture	No	No	No	8.3	1	Positive
207	Single Family	First	Exterior	14	A	Window2	Stop	Wood	White	Deteriorated	Moisture	No	No	No	7.3	1	Positive
208	Single Family	First	Exterior	14	A	Window2	Sash	Wood	White	Deteriorated	Moisture	No	No	No	8	1	Positive
209	Single Family	First	Exterior	14	A	Window3	Stop	Wood	White	Deteriorated	Moisture	No	No	No	8.6	1	Positive
210	Single Family	First	Exterior	14	A	Window3	Sash	Wood	White	Deteriorated	Moisture	No	No	No	8.4	1	Positive
211	Single Family	First	Stairwell2	15	N/A	Ceiling	Ceiling	Plaster	White	Intact	None	No	No	No	0.1	1	Negative
212	Single Family	First	Stairwell2	15	B	Wall	Wall	Plaster	White	Intact	None	No	No	No	0.2	1	Negative
213	Single Family	First	Stairwell2	15	C	Wall	Wall	Plaster	White	Intact	None	No	No	No	0.3	1	Negative
214	Single Family	First	Stairwell2	15	D	Wall	Wall	Plaster	White	Intact	None	No	No	No	-0.2	1	Negative
215	Single Family	First	Stairwell2	15	C	Stair	Riser	Plaster	White	Intact	None	No	No	No	0	1	Negative
216	Single Family	First	Stairwell2	15	C	Stair	Riser	Wood	Varnish	Intact	None	No	No	No	0	1	Negative
217	Single Family	Basement	Basement	16	N/A	Ceiling	Ceiling	Plaster	White	Intact	None	No	No	No	0.2	1	Negative
218	Single Family	Basement	Basement	16	A	Wall	Wall	Concrete	White	Deteriorated	None	No	No	No	0.1	1	Negative
219	Single Family	Basement	Basement	16	B	Wall	Wall	Concrete	White	Deteriorated	None	No	No	No	0.3	1	Negative

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULT
220	Single Family	Basement	Basement	16	C	Wall	Wall	Concrete	White	Deteriorated	None	No	No	No	0	1	Negative
221	Single Family	Basement	Basement	16	D	Wall	Wall	Concrete	White	Deteriorated	None	No	No	No	-0.2	1	Negative
222	Single Family	Basement	Basement	16	D	Door	Casing	Wood	Varnish	Intact	None	No	No	No	-0.2	1	Negative
223	Single Family	Basement	Basement	16	D	Door	Stile	Wood	Varnish	Intact	None	No	No	No	0	1	Negative
224	Single Family	Basement	Basement	16	C	Door	Stile	Wood	Varnish	Intact	None	No	No	No	-0.2	1	Negative
225	Single Family	Basement	Basement	16	C	Door	Rail	Wood	Varnish	Intact	None	No	No	No	-0.1	1	Negative
226	Single Family	Basement	Basement	16	B	Door	Rail	Wood	Varnish	Intact	None	No	No	No	0.1	1	Negative
227	Single Family	Basement	Basement	16	N/A	Floor	Floor	Concrete	Red	Deteriorated	Moisture	No	No	No	0.1	1	Negative
228	Single Family	Basement	Laundry	17	N/A	Ceiling	Ceiling	Concrete	Red	Deteriorated	Moisture	No	No	No	0	1	Negative
229	Single Family	Basement	Laundry	17	A	Wall	Wall	Concrete	White	Deteriorated	Moisture	No	No	No	0.1	1	Negative
230	Single Family	Basement	Laundry	17	C	Wall	Wall	Concrete	White	Intact	Moisture	No	No	No	0.2	1	Negative
231	Single Family	Basement	Laundry	17	D	Wall	Wall	Concrete	White	Intact	Moisture	No	No	No	-0.2	1	Negative
232	Single Family	Basement	Laundry	17	C	Closet	Ceiling	Concrete	White	Intact	Moisture	No	No	No	0	1	Negative
233	Single Family	Basement	Laundry	17	C	Closet	A Wall	Concrete	White	Intact	Moisture	No	No	No	0.3	1	Negative
234	Single Family	Basement	Laundry	17	C	Closet	B Wall	Concrete	White	Intact	Moisture	No	No	No	0.2	1	Negative
235	Single Family	Basement	Laundry	17	C	Closet	C Wall	Concrete	White	Intact	Moisture	No	No	No	0.1	1	Negative
236	Single Family	Basement	Laundry	17	C	Closet	D Wall	Concrete	White	Intact	Moisture	No	No	No	0	1	Negative
237	Single Family	Basement	Laundry	17	A	Closet	D Wall	Concrete	White	Intact	Moisture	No	No	No	-0.2	1	Negative
238	Single Family	Basement	Laundry	17	A	Closet	C Wall	Concrete	White	Intact	Moisture	No	No	No	0.2	1	Negative
239	Single Family	Basement	Laundry	17	A	Closet	B Wall	Concrete	White	Intact	Moisture	No	No	No	0.2	1	Negative
240	Single Family	Basement	Laundry	17	A	Closet	A Wall	Concrete	White	Intact	Moisture	No	No	No	0.1	1	Negative
241	Single Family	Basement	Laundry	17	A	Closet	Chute	Wood	White	Intact	Moisture	No	No	No	0	1	Negative
242	Single Family	Basement	Tool Room	18	N/A	Ceiling	Ceiling	Concrete	White	Deteriorated	Moisture	No	No	No	0.1	1	Negative
243	Single Family	Basement	Tool Room	18	A	Wall	Wall	Concrete	White	Deteriorated	Moisture	No	No	No	0.2	1	Negative
244	Single Family	Basement	Tool Room	18	B	Wall	Wall	Concrete	White	Deteriorated	Moisture	No	No	No	0.2	1	Negative

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULT
245	Single Family	Basement	Tool Room	18	C	Wall	Wall	Concrete	White	Deteriorated	Moisture	No	No	No	0	1	Negative
246	Single Family	Basement	Tool Room	18	D	Wall	Wall	Concrete	White	Deteriorated	Moisture	No	No	No	0.2	1	Negative
247	Single Family	First	Garage	19	A	Door1	Casing	Wood	White	Deteriorated	Moisture	No	No	No	26.1	1	Positive
248	Single Family	First	Garage	19	A	Door1	Jamb	Wood	White	Deteriorated	Moisture	No	No	No	29.8	1	Positive
249	Single Family	First	Garage	19	A	Door2	Jamb	Wood	White	Deteriorated	Moisture	No	No	No	33	1	Positive
250	Single Family	First	Garage	19	A	Door2	Casing	Wood	White	Deteriorated	Moisture	No	No	No	23.8	1	Positive
251	Single Family	First	Garage	19	A	Door2	Lintel	Metal	White	Deteriorated	Moisture	No	No	No	27	1	Positive
252	Single Family	First	Garage	19	A	Door1	Lintel	Metal	White	Deteriorated	Moisture	No	No	No	23.9	1	Positive
253	Single Family	First	Garage	19	A	Gutter	Downspout	Metal	White	Deteriorated	Moisture	No	No	No	0.7	1	Negative
254	Single Family	First	Exterior	14	B	Porch	Floor	Concrete	White	Deteriorated	Moisture	No	No	No	-0.3	1	Negative
255	Single Family	First	Exterior	14	B	Window1	Mullion	Wood	White	Deteriorated	Moisture	No	No	No	0	1	Negative
256	Single Family	First	Exterior	14	B	Window 2	Storm Sash	Wood	White	Deteriorated	Moisture	No	No	No	2.8	1	Positive
257	Single Family	First	Exterior	14	B	Window 3	Sorm Sash	Wood	White	Deteriorated	Moisture	No	No	No	6.3	1	Positive
258	Single Family	First	Exterior	14	B	Window 4	Storm Sash	Wood	White	Deteriorated	Moisture	No	No	No	2.1	1	Positive
259	Single Family	First	Exterior	14	A	Window1	Shutter	Wood	White	Deteriorated	Moisture	No	No	No	1.3	1	Positive
260	Single Family	First	Exterior	14	A	Window 2	Shutter	Wood	White	Deteriorated	Moisture	No	No	No	2	1	Positive
261	Single Family	First	Exterior	14	A	Wall	Wall 1	Wood	White	Deteriorated	Moisture	No	No	No	0.3	1	Negative
262	Single Family	First	Exterior	14	A	Wall	Wall 2	Wood	White	Deteriorated	Moisture	No	No	No	-0.4	1	Negative
263	Single Family	First	Exterior	14	D	Wall	Downspout	Metal	White	Deteriorated	Moisture	No	No	No	0.1	1	Negative
264	Single Family	First	Exterior	14	C	Roof	Support	Metal	White	Deteriorated	Moisture	No	No	No	-0.1	1	Negative
265	Caliibration	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	1.1	1	Positive
266	Caliibration	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	0.8	1	Negative
267	Caliibration	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	0.9	1	Negative
268	Caliibration	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	-0.1	1	Negative
269	Caliibration	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	-0.1	1	Negative

READING #	BUILDING	LEVEL/FLOOR	ROOM LOCATION	ROOM #	WALL	COMPONENT	SUB COMPONENT	SUBSTRATE	COLOR	CONDITION	CONDITION CAUSE	FRICTION	IMPACT	TEETH MARKS	XRF READING	XRF LIMIT	RESULT
270	Calibration	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	-0.2	1	Negative

** HUD reporting limits for positive XRF results are ≥ 1.0 mg/cm² for painted or glazed surfaces.*

D-2: XRF Device Used

HUERESIS PCS

HEURESIS PCS December 2015

Performance Characteristic Sheet

EFFECTIVE DATE: December 1, 2015

MANUFACTURER AND MODEL:

Make: ***Heuresis***

Models: ***Model Pb200i***

Source: ***^{57}Co, 5 mCi (nominal – new source)***

FIELD OPERATION GUIDANCE

OPERATING PARAMETERS:

Action Level mode

XRF CALIBRATION CHECK LIMITS:

0.8 to 1.2 mg/cm^2 (inclusive)

SUBSTRATE CORRECTION:

Not applicable

INCONCLUSIVE RANGE OR THRESHOLD:

ACTION LEVEL MODE READING DESCRIPTION	SUBSTRATE	THRESHOLD (mg/cm^2)
Results not corrected for substrate bias on any substrate	Brick	1.0
	Concrete	1.0
	Drywall	1.0
	Metal	1.0
	Plaster	1.0
	Wood	1.0

BACKGROUND INFORMATION

EVALUATION DATA SOURCE AND DATE:

This sheet is supplemental information to be used in conjunction with Chapter 7 of the HUD Guidelines for the Evaluation and Control of Lead-Based Paint Hazards in Housing ("HUD Guidelines"). Performance parameters shown on this sheet are calculated using test results on building components in the HUD archive. Testing was conducted on 146 test samples in November 2015, with two separate instruments running software version 2.1-2 in Action Level test mode. The actual source strength of each instrument on the day of testing was approximately 2.0 mCi; source ages were approximately one year.

OPERATING PARAMETERS:

Performance parameters shown in this sheet are applicable only when properly operating the instrument using the manufacturer's instructions and procedures described in Chapter 7 of the HUD Guidelines.

XRF CALIBRATION CHECK:

The calibration of the XRF instrument should be checked using the paint film nearest 1.0 mg/cm^2 in the NIST Standard Reference Material (SRM) used (e.g., for NIST SRM 2579, use the 1.02 mg/cm^2 film).

If the average (rounded to 1 decimal place) of three readings is outside the acceptable calibration check range, follow the manufacturer's instructions to bring the instrument into control before XRF testing proceeds.

SUBSTRATE CORRECTION VALUE COMPUTATION:

Chapter 7 of the HUD Guidelines provides guidance on correcting XRF results for substrate bias. Supplemental guidance for using the paint film nearest 1.0 mg/cm^2 for substrate correction is provided:

XRF results are corrected for substrate bias by subtracting from each XRF result a correction value determined separately in each house for single-family housing or in each development for multifamily housing, for each substrate. The correction value is an average of XRF readings taken over the NIST SRM paint film nearest to 1.0 mg/cm^2 at test locations that have been scraped bare of their paint covering. Compute the correction values as follows:

Using the same XRF instrument, take three readings on a bare substrate area covered with the NIST SRM paint film nearest 1 mg/cm^2. Repeat this procedure by taking three more readings on a second bare substrate area of the same substrate covered with the NIST SRM.

Compute the correction value for each substrate type where XRF readings indicate substrate correction is needed by computing the average of all six readings as shown below.

For each substrate type (the 1.02 mg/cm^2 NIST SRM is shown in this example; use the actual lead loading of the NIST SRM used for substrate correction):

Correction value = (1st + 2nd + 3rd + 4th + 5th + 6th *Reading*)/6 - 1.02 mg/cm^2

Repeat this procedure for each substrate requiring substrate correction in the house or housing development.

EVALUATING THE QUALITY OF XRF TESTING:

Randomly select ten testing combinations for retesting from each house or from two randomly selected units in multifamily housing.

Conduct XRF re-testing at the ten testing combinations selected for retesting.

Determine if the XRF testing in the units or house passed or failed the test by applying the steps below.

Compute the Retest Tolerance Limit by the following steps:

Determine XRF results for the original and retest XRF readings. Do not correct the original or retest results for substrate bias. In single-family and multi-family housing, a result is defined as a single reading. Therefore, there will be ten original and ten retest XRF results for each house or for the two selected units.

Calculate the average of the original XRF result and the retest XRF result for each testing combination.

Square the average for each testing combination.

Add the ten squared averages together. Call this quantity C.

Multiply the number C by 0.0072. Call this quantity D.

Add the number 0.032 to D. Call this quantity E.

Take the square root of E. Call this quantity F.

Multiply F by 1.645. The result is the Retest Tolerance Limit.

Compute the average of all ten original XRF readings.

Compute the average of all ten re-test XRF readings.

Find the absolute difference of the two averages.

If the difference is less than the Retest Tolerance Limit, the inspection has passed the retest. If the difference of the overall averages equals or exceeds the Retest Tolerance Limit, this procedure should be repeated with ten new testing combinations. If the

difference of the overall averages is equal to or greater than the Retest Tolerance Limit a second time, then the inspection should be considered deficient.

Use of this procedure is estimated to produce a spurious result approximately 1% of the time. That is, results of this procedure will call for further examination when no examination is warranted in approximately 1 out of 100 dwelling units tested.

TESTING TIMES:

In the Action Level paint test mode, the instrument takes the longest time to complete readings close to the Federal standard of 1.0 mg/cm^2. The table below shows the mean and standard deviation of actual reading times by reading level for paint samples during the November 2015 archive testing. The tested instruments reported readings to one decimal place. No significant differences in reading times by substrate were observed. These times apply only to instruments with the same source strength as those tested (2.0 mCi). Instruments with stronger sources will have shorter reading times and those with weaker sources, longer reading times, than those in the table.

Mean and Standard Deviation of Reading Times in Action Level Mode by Reading Level		
Reading (mg/cm^2)	Mean Reading Time (seconds)	Standard Deviation (seconds)
< 0.7	3.48	0.47
0.7	7.29	1.92
0.8	13.95	1.78
0.9 – 1.2	15.25	0.66
1.3 – 1.4	6.08	2.50
≥ 1.5	3.32	0.05

CLASSIFICATION OF RESULTS:

XRF results are classified as positive if they are greater than or equal to the stated threshold for the instrument (1.0 mg/cm^2), and *negative* if they are *less than* the threshold.

Although the XRF instrument is not designed to analyze non-painted surfaces, according to the State of California (Department of Toxic Substances Control, Feb 2012), it can be an effective screening tool to determine lead content in metal.

DOCUMENTATION:

A report titled *Methodology for XRF Performance Characteristic Sheets* (EPA 747-R-95-008) provides an explanation of the statistical methodology used to construct the data in the sheets, and provides empirical results from using the recommended inconclusive ranges or thresholds for specific XRF instruments. The report may be downloaded at http://www.epa.gov/lead/methodology-xrf-performance-characteristic-sheets-epa-747-r-95-008-september-1997.

This XRF Performance Characteristic Sheet (PCS) was developed by QuanTech, Inc., under a contract with the XRF manufacturer.

Reference

Department of Toxic Substances Control. (Feb 2012). *Testing and Evaluation of Lead Content in Plumbing Products, Materials and Components.* State of California. Retrieved from http://www.dtsc.ca.gov/PollutionPrevention/upload/lead-in-plumbing-testing-protocol.pdf

APPENDIX E – LABORATORIES USED & ORIGINAL LABORATORY ANALYSIS REPORTS

E-1: Laboratories Used

Trace Metals Laboratory used to test dust and soil samples:

Accurate Analytical Testing LLC
Trace Metals Laboratory
30105 Beverly Road
Romulus, MI 48174
P: 571-335-9490

Drinking Water Laboratory used to test water samples:

Accurate Analytical Testing LLC
Drinking Water Laboratory
30105 Beverly Road
Romulus, MI 48174
P: 571-335-9490

E-2: Original Laboratory Analysis Reports

All of the original laboratory analysis reports for any samples that were sent for testing are included in the following pages.

ACCURATE ANALYTICAL TESTING LLC

30105 Beverly Road
Romulus, MI 48174
Ph: 734-629-8161; Fax: 734-629-8431

Certificate of Analysis: Lead In Dust Wipe by EPA Method 7000B/3050B*

Client : Green Solutions Environmental Services
17800 Woodward Suite 200
Detroit, MI 48203
Attn : Denise Griffith **Email :** cdgriffith@gsgroupmi.com
Phone : 313 279-0449 **Fax :**

Client Project : 15327 WARWICK

Project Location : 15327 WARWICK

AAT Project : 553649
Sampling Date : 02/18/2020
Date Received : 02/19/2020
Date Analyzed : 02/20/2020
Date Reported : 2/20/2020 11:22:15AM

Lab Sample ID	Client Code	Sample Description	Length (inch)	Width (inch)	Area (Sq ft)	Results Lead µg/ft2 *
5332612	1	LR FL	12	12	1.00	<5.00
5332613	2	LR WS	2	17	0.24	51.69
5332614	3	DR FL	12	12	1.00	<5.00
5332615	4	DR WS	2	17	0.24	32.48
5332616	5	KIT FL	12	12	1.00	<5.00
5332617	6	KIT WT	2	17	0.24	32810.82
5332618	7	BATH 2 FL	12	12	1.00	5.34
5332619	8	BATH 2 WT	2	17	0.24	174.73
5332620	9	BDRM 1 FL	12	12	1.00	<5.00
5332621	10	BDRM 1 WT 2	2	17	0.24	<21.18
5332622	11	BDRM 3 FL	12	12	1.00	5.25
5332623	12	BDRM 3 WS	2	17	0.24	144.87
5332624	13	FIELD BLANK FL	12	12	1.00	<5.00

Analyst Signature

Nathan Ditty

ND = Not Detected, N/A = Not Available, RL = Reporting Limit, Analytical Reporting Limit is 5 ug/sample. For true values assume (2) significant figures. AAT internal SOP S205. The method and batch QC are acceptable unless otherwise stated. MI Lead Regulatory Limits including Pb Clearance: 10 ug/ft2 (Interior Floors), 40 ug/ft2 (Porch Floors), 100 ug/ft2 (Window Sills), 100 ug/ft2 (Window Troughs). The laboratory operates in accord with ISO 17025 guidelines and holds limited scopes of accreditation under AIHA-LAP and NY State DOH ELAP programs. These results are submitted pursuant to AAT, LLC current terms and conditions of sale, including the company's standard warranty and limitation of liability provisions. Analytical results relate to the samples as received by the lab. AAT will not assume any liability or responsibility for the manner in which the results are used or interpreted. All Quality Control requirements for the samples this report contains have been met. AAT does not blank correct reported values. Sample data apply only to items analyzed. Results are calculated with wipe dimensions supplied by client. Reproduction of this document other than in its entirety is not authorized by AAT, LLC. * = Validated modified method. Samples are stored for 15 days following report date

Accredited Laboratory Pb Lead Lab ID #100986

AIHA LAP- Lab ID #100986, NY State DOH ELAP -Lab ID #11864, State of Ohio- Lab ID # 10042

Date Printed: 02/20/2020 AAT Project: 553649

ACCURATE ANALYTICAL TESTING LLC

30105 Beverly Road
Romulus, MI 48174
Ph: 734-629-8161; Fax: 734-629-8431

To : Green Solutions Environmental Services
17800 Woodward Suite 200
Detroit, MI 48203

Attn : Denise Griffith **Email :** cdgriffith@gsgroupmi.com
Phone : 313 279-0449

Project Location : 15327 WARWICK

AAT Project : 553649
Client Project : 15327 WARWICK
Date Reported : 2/20/2020 11:22:15AM

Sample	Client Code	Analysis Requested	Completed	Analyst
5332612	1	Dust Wipe	02/20/2020	Nathan Ditty
5332613	2	Dust Wipe	02/20/2020	Nathan Ditty
5332614	3	Dust Wipe	02/20/2020	Nathan Ditty
5332615	4	Dust Wipe	02/20/2020	Nathan Ditty
5332616	5	Dust Wipe	02/20/2020	Nathan Ditty
5332617	6	Dust Wipe	02/20/2020	Nathan Ditty
5332618	7	Dust Wipe	02/20/2020	Nathan Ditty
5332619	8	Dust Wipe	02/20/2020	Nathan Ditty
5332620	9	Dust Wipe	02/20/2020	Nathan Ditty
5332621	10	Dust Wipe	02/20/2020	Nathan Ditty
5332622	11	Dust Wipe	02/20/2020	Nathan Ditty
5332623	12	Dust Wipe	02/20/2020	Nathan Ditty
5332624	13	Dust Wipe	02/20/2020	Nathan Ditty

Reviewed By Quality Assurance Coordinator - Stephen Northcott

AIHA LAP- Lab ID #100986, NY State DOH ELAP -Lab ID #11864, State of Ohio- Lab ID # 10042

ACCURATE ANALYTICAL TESTING LLC

30105 BEVERLY RD.
ROMULUS MI 48174
(734) 699-LABS (5227)
FAX: (734) 699-8407
www.accurate-test.biz

AIHA LAP, LLC ACCREDITED LABORATORY
ENVIRONMENTAL LEAD
ISO/IEC 17025:2005

SUBMITTING COMPANY
Green Solutions
Environmental Services
17800 Woodward Ave., Ste 200
Detroit, MI 48203
PO #

CONTACT INFORMATION
Denise Griffith
Office: 313-279-0449
Fax: 279-0519
Cell:
Email: cdariffith@asaroupmi.com

PROJECT NUMBER
SAMPLING DATE: 2/18/2020
PROJECT ADDRESS 15327 Warwick
SAMPLE START TIME 9:05AM SAMPLE END TIME 9:25AM
RISK ASSESOR Donnez Hemphill

REQUESTED ANALYSIS LEAD
SINGLE WIPE DUST (X)
COMPOSITE SOIL ( )
PAINT CHIP | % By Wt. ( ) | mg/cm² ( )

Request Turnaround time (please check one)
SAME DAY ( ) | 24 Hour ( )
48 Hour (X) | 72 hours ( )
If no indicated, default is 72 hours

LAB ID	CLIENT SAMPLE ID	DESCRIPTION	WS, WT, F	WIPE AREA (e.g. 12 X 12)
12	1	LR	FL	12 X 12
13	2	LR	WS	2 X 17
14	3	DR	FL	12 X 12
15	4	DR	WS	2 X 17
16	5	Kit	FL	12 X 12
17	6	Kit	WT	2 X 17
18	7	Bath 2	FL	12 X 12
19	8	Bath 2	WT	2 X 17
20	9	Bd Rm 1	FL	12 X 12
21	10	Bd Rm 1	WT (2)	2 X 17
22	11	Bd Rm 3	FL	12 X 12
23	12	Bd Rm 3	WS	2 X 17
24	13	Field Blank	FL	12 X 17
				X
				X

CLIENT COMMENTS
Risk Assessor: D. Hemphill
Samples shipped 13

SAMPLE CONDITION
SEALS INTACT Y N
PRESERVATIVES Y N
CONTAINERS LABELED Y N

LAB REMARKS
17241
LAB PROJECT NUMBER 5536049

SAMPLES RELINQUISHED BY	SAMPLES RECEIVED BY	Date	TIME	
D. Hemphill			AM	PM
			AM	PM
		2-19	AM	PM

By submitting samples to AAT, the client agrees to AAT's terms and conditions.