

# CUYAHOGA COUNTY BOARD OF HEALTH

YOUR TRUSTED SOURCE FOR PUBLIC HEALTH INFORMATION

**Investigation Location:**

Address \_\_\_\_\_ City \_\_\_\_\_

Owner Name \_\_\_\_\_ Telephone \_\_\_\_\_

Contractor Name \_\_\_\_\_ Telephone \_\_\_\_\_

**Instructions:**

Select the desired service from the menu below with a check mark.  
A complete description of the service categories are provided on the reverse side

<b>Category A</b>	<b>Lead-based Paint Inspection/Risk Assessment</b>	<b>\$350</b>	
<b>Category B</b>	<b>Public Health Lead Risk Assessment</b>	<b>\$250</b>	
<b>Category C</b>	<b>Limited Scope Targeted Lead-Based Paint Inspection of Designated Areas for Rehab up to \$5,000*</b>	<b>\$150</b>	
<b>Category D</b>	<b>Limited Scope Lead Based Paint Clearance <u>or</u> Repeat Clearance <u>or</u> Soil Sampling</b>	<b>\$125</b>	
<b>Category E</b>	<b>Post Abatement Final Clearance Examination*</b>	<b>\$225</b>	

*\*Write in the space below the exact location(s) of painted surfaces to be disturbed by rehabilitation work (attach specs if available to help locate the exact area(s) to be disturbed).*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Disclaimer:**

The results of the above services apply only to the date and time that the evaluation was made. While the lead-based paint services are comprehensive; remodeling, alterations, and the passing of time may change household lead level concentrations.

All services will be performed in accordance with HUD protocols.

*I have read, understand, and agree to the conditions stated on this form.*

\_\_\_\_\_  
(Requester's Signature)

\_\_\_\_\_  
(Date)

THE COUNTY AUDITOR REQUIRES THAT **ALL RETURNED CHECKS** BE CHARGED A PROCESSING FEE OF **TEN DOLLARS (\$10.00)**  
SUBMISSION OF A BAD CHECK CONSTITUTES A CRIME UNDER THE LAWS OF THE STATE OF OHIO

# Service Descriptions

## Category A

### Lead-based Paint Inspection/Risk Assessment

This service will follow HUD protocols and include a paint inspection combined with a lead risk assessment. This will provide an inventory of the status of all painted surfaces, as well as identifying and describing the severity of each lead hazard. XRF analysis along with environmental sampling (dust wipes, soil) will be performed.

## Category B

### Public Health Lead Risk Assessment

This service will follow HUD protocols for lead risk assessment of the residence. This service will provide the status of the painted surfaces that are in poor condition or a friction surface, as well as describing the severity and nature of each lead hazard, along with recommendations for corrective action. XRF analysis and environmental sampling (dust wipes, soil) will be performed as necessary.

## Category C

### Limited Scope Lead-Based Paint Inspection for Rehab up to \$5,000

This service will follow HUD protocols for rehabilitation work up to \$5,000, and will include a surface paint inspection of *only* the painted surface(s) to be disturbed. This service will provide the status of the painted surface. XRF analysis along with environmental sampling (dust wipes), if necessary, will be performed. *Only the area(s) of paint to be disturbed by rehab work specified on this form will be tested.*

## Category D

### Limited Scope or Repeat Lead-Based Paint Clearance

This service will follow HUD protocols and may include environmental sampling (dust wipes) of the disturbed area(s) to provide clearance of the designated area(s) only, at the completion of the scope of work. For interior work, proof of containment must be visible at time of clearance.

### Soil Sampling

This service will follow HUD protocols for collection of soil samples in play areas, potential garden lots, or other bare soil areas.

## Category E

### Post Abatement Final Clearance Examination

Testing performed in accordance with HUD protocols. This service will include environmental sampling (dust wipes) at the completion of the scope of work. *All areas of paint disturbed by rehab work specified on this form will be tested.*

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Terrence M. Allan, R.S., M.P.H. Health Commissioner