## Anderson Lead Inspections

Stow, MA 01775 www.andersonlead.com

Craig Anderson, Lic # M-3801 Master Inspector/Risk Assessor

(978) 875-3081 canderson@andersonlead.com

## Lead Inspection / Risk Assessment

St.#	528	_Street Name_	Great Eln	<u> </u>	Street Type	Way		Unit	none
City		Acton		Code	01718				
	Name: Address:	Jennie San 528 Great E	dberg Elm Way, Acton, M	A 01718			Prop	nber of Rooms erty Type: Single Family	in Unit: 9
		tion: (978)		1011110	, -			Multi Family	# of Units:
			r): Frederick Osei-	Yeboah (61	2) 886-4878		$\cdot =$	Condominium	# of Units: 10
Client	Address:	388 Great R	Rd, Apt. 16B, Acton,	MA 01720				Day Care	Other:
Key COV DC MET MR NA NC Tile VB	Not Acce No Coati Tile (test Vinyl Ba	ling p. Window ssible ng ing suggested)	Key Delead/IC Methor COV Covered DIP Dipped ENC Encapsulated INT Intact MI Made Intact PRE Prepared for Enc. Component Does	REM REF SCR SFR SLD STP	A Removed Replaced Scraped Storm Frame Re Sealed Stripped	emoved	Finis Possi Y Na <sub>2</sub> S	ble Pb Water Se  es  No  Testing 1  Expiration Date:	sement? Yes No rvice Line Not Tested Method Used / Cluorescence
Comme	nts / Note	s:						Demarcation Li	
									ompliance Evaluation
Floor#	<u>1</u> (lo	cvel within building	of unit being inspected) Flo	00r# <u>2</u>	_ c ⇒			Property Diag	ram / Unit Labels
B	Lang 1	(Street Side)	BATH  Start Here	Rang 3 8474 2	HALL 2 STAYLS	BATH.	D		
A (Street Side)  Start Here  A (Street Side)  Start Here  A (Street Side)  Pb (lead) equal to or greater than 1.0 mg/cm² with x-ray fluorescence or positive with Na <sub>2</sub> S is Dangerous.									A (Street Side)
XRF Calibration Recorded in Log Book Address Verified through USPS  Research on Lead Related History for Address  www.statc.ma.us/dph/clppp or 800-532-9571							compl compl	ete ete	
Inspect	Anders or's Name	(print)		M-3801 License #		Signat	ure		<u>11 / 05 / 19</u> Date
	A - revised 06					<u> </u>			pale

Address: 320 Great I	Apt#	nor	<b>1e</b> City	Acton, MA 01718	_ Page 2 of <u>25</u>
INSPECTION HISTOR	Y	INTERIM CONTROL			
Determination	Inspector Name:	, Lic#	Visual	P.A. Nomos	11-4
	Signature		Risk Assessment	R.A. Name:	, LIC#
Load Hazards?	Signature	<del></del>	<del>                                     </del>	N Signature	
Comprehensive		•	Urgent Pb. Hazards?		
Initial Inspection Y	Inspector Name: Craig Anderson	. Lic# 3801	Dust Taken for Risk Assessment	Y R.A. Name:	, Lic#_
1 1 0 5 1 9	Signature			N Signature	·
Lcad Hazards?	Signature		Urgent Pb. Hazards?	11 Signature	
Comp Initial			Visual Portion of		
w/Partial PCAD Y	inspector Name:	. Lic#	Reinspection for	P R.A. Name:	, Lic#
N			Interim Control	F Signature	
Lead Hazards?	Signature				
Addendum (add-on			Dust Taken for Risk	P R.A. Name:	1 !-#
to Initial Inspection)	Inspector Name:	_, Lic#	Assessment Reinsp.	<del></del>	
	Signature			F Signature	<del></del>
Lead Hazards?	oignature		Visual Portion of		
Addandson - Tall			Reinspection for	R.A. Name:	l ic#
Addendum as Full Inspection Y	Inspector Name:	. Lic#	Interim Control		
N				F Signature	<del></del>
Lead Hazards?	Signature				
Lead riazards:			Dust Taken for Risk	P R.A. Name:	, Lic#
Walk Through for	Inspector Name:	_, Lic#	Assessment Reinsp.	F Signature	
Ed/Consultation	Signature		<u> </u>		
			Risk Assessment	Y R.A. Name:	l ic#
REINSPECTION HISTO	PRY		Recertification	<u>-</u>	
Visual Portion of Reocc. Reinspection	Inspector Name:	_, Lic#		N Signature	
F F	Signature		Urgent Pb. Hazards?		
<u></u>			Dust Taken for	P R.A. Name:	, Lic#
Visual Portion of Reocc. Reinspection	Inspector Name:	_, Lic#	RA Recertification	<del>-</del>	<del>-</del>
Reocc. Reinspection F	Signature		<u> </u>	F Signature	<del></del>
			POST COMPLIANO	CE ASSESSMENT DETER	MINATIONS
Dust Taken for P	Inspector Name:	_, Lic#			
Rcocc. Reinspection F	Signature		PCAD	In an action Manager	
			J	Y Inspector Name:	, LIC#
Dust Taken for P	Inspector Name:	_, Lic#	Lcad Hazards?	N Signature	
Reocc. Reinspection F	Signature				
	organical c	<del></del>	Full Inspection Acting as PCAD	Inspector Name:	. Lic#
Visual Portion of Final Reinspection P	Inspector Name:	. Lic#		<del>-</del>	
t mai reomapection			Lead Hazards?	N Signature	
F	Signature		Load Hazards!		
Visual Portion of	Inspector Name:	l ie#	Visual Portion of	P Inspector Name:	, Lic#
Final Reinspection P	· · · · · · · · · · · · · · · · · · ·	_, LIU#	LICAD Remapeenon	F Signature	
F	Signature				····
Dust Taken for Final D	Inspector Name:	شمة ا	Dust Taken for	P inspector Name:	, Lic#
Reinsp. (No Reoce)		_, 1.10#	I PLAD Keinspection II.		
F	Signature			F Signature	<del></del>
Duet Takon G. First	I		Dust Taken for	nspector Name:	l io#
Dust Taken for Final Reinsp. (No Reoce)	Inspector Name:	_, Lic#	PCAD Reinspection	<u></u>	
F	Signature			F_Signature	

Address:_	528 Gre	eat Elm Way	Apt#	one	_ City	Acton, MA 01718	Page 3 of <u>25</u>
REOCCU	PANCY C	ERTIFICATE HISTORY	,	COMPLIA	ANCE HI	STORY (CONT.)	
Reocci Only High/N	ficate of cupancy y after Mod Risk ms rule)	inspector Name:		Certificate Maintain Complian No Work= No Work= 7 I	cd ncc	Inspector Name:	
Reocci Only High/N	ficate of cupancy y after Mod Risk ms rule)	Inspector Name: Signature		Certificate Restore Complian Dust wipes an	d ncc	Inspector Name:	
Reocc Only High/N	cupancy y after Aod Risk ms rule)	Inspector Name:		Certificate Maintaine Complian No Work = N Work = 7 I	ed ice	Inspector Name:	
Letter of Community 1 1 0 No prior	Full Initial pliance    5   1   9     or history/   ns of UD	Inspector Name: <u>Craig And</u> Signature	lerson , Lic#_3801	Certificate Restorec Complian Dust wipes an people	d cc d auth.	Inspector Name:	
No pric	of Interim ntrol or Comp. s in 1 yr.	Inspector Name:		OTHER H  Approvec CLPPP Wai  Attach to Co	d iver	WAIVERS/UD Inspector Name:	
Expires :	Control  2 yrs from Interim	Inspector Name:	, Lic#	Approved CLPPP Wai	iver	Inspector Name:	
Dele Comp	of Full cading pliance pes if No cocc.	Inspector Name:		UD / DES Vie	P F	Inspector Name:Signature	
Main Comp	icate of stained pliance Solution Property of the stained pliance Solution Property of the stained pro	Inspector Name:		UD / DES D Taken No LOC Issu	T F		
Certif Res Com	icate of stored	Inspector Name:		UD / DES D Taken No LOC Issu	P F	Inspector Name:Signature	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	es and auth.			UD / DES Fi	P	Inspector Name:	