

M1 - LEAD ACTIVITY DECLARATION

This form must be completed by a State of Michigan licensed lead professional and submitted to the City of Detroit's Buildings, Safety, Engineering, and Environmental Department, Property Maintenance Division.

Include the following reports: Lead Based Paint Inspection, Lead Based Paint Risk Assessment; Remediation and Clearance Summary; and all related laboratory results must be submitted to complete reporting requirements.

Subject Property Location: _____

City: _____ Detroit _____ State: _____ MI _____ Zip: _____ 48 _____

Risk Assessor's Name: _____

Phone: _____ State Certification Number: _____

Risk Assessor's Address: _____

City: _____ State: _____ Zip: _____

Company Name: _____ Phone: _____

Company Address (if different): _____

City: _____ State: _____ Zip: _____

Property Owner's Name: _____ Phone: _____

Property Owner's Address: _____

City: _____ State: _____ Zip: _____

Date(s) of Lead Inspection: _____ Date(s) of Lead Hazard Assessment: _____

Were lead based paint hazards identified? No Yes

If yes, indicate what type(s): Paint Dust Soil

Were potential lead based paint hazards identified? No Yes

Was soil sampled? No Yes

If yes, indicate what type(s): Play Area Drip-Line/Foundation Vegetable Garden

Other (describe): _____

Indicate why soil was not sampled: _____

Note: If soil conditions cannot be ascertained risk assessor must return to site and evaluate the need for soil sampling. **When soil conditions are determined, the risk assessor must submit an addendum report with their findings.**

Lead-based paint detection technique used (check one):

Paint Chip Samples XRF (Serial # _____)

The undersigned hereby acknowledges that the information provided herein and related reports are complete, accurate, and true. The undersigned also accepts full and irrevocable responsibility for the validity of the information provided, legal and regulatory, in accordance with all federal, state, and local requirements. Work Practice Standards adopted by the State of Michigan for Lead Hazard Control for a Lead inspection, R325.99403, and for a Risk Assessment, R325.99494, must be adhered to.

Risk Assessor's State Certification #: _____ Expiration Date: _____

Signature: _____ Date: _____

Complete and attach additional copies of this form, as needed, for complete reporting.

