TRONMENT 867531  ICATE NO.  JOHNER NAME  Code  County  Property Construction Date	marked. The following attachments are required to be submitted with the certificate: Form C, laboratory results, and diagrams for Full Risk Reduction, and Forms B and C, original signed copy of Supervisor's Statement of Work, laboratory results, and diagrams collected for Modified Risk Reduction. Form E for Lead Free, which shall include a \$10 per unit processing fee for each certificate. To be paid to: P.O. Box 1417, Baltimore, MD 21203. The certificate shall be signed by the inspection and within 10 days following Lead Free and Lead Safe Inspections and within 10 days following Lead Free and Lead Safe Inspections and within 10 days following the receipt of dust sample results for Full and Modified Risk Reduction Inspections. Copies of all inspection records shall be maintained for at least 5 years by lead inspection contractors. Maximum penalties will be pursued by MDE for any falsified documentation that is received by MDE. Indicate "0000" if Property Construction Date is unknown. Lead paint inspection certificates and the supporting documentation for inspection certificates to: P.O. Box 943, Jessup, MD 20794.  INSPECTION CATEGORIES	5. Lead Safe	Methods	A. Dust Inspection	☐B. Dust Inspection and Visual Inspection	OR Dust Inspection with Lead Free Exterior	or D. Dust Inspection and Visual Inspection with Lead Free Exterior AND Verification that windows are lead free or have been treated so friction surfaces are lead free		PASSED Based on the findings of the attached inspection report(s), I certify that the property anit meets the certification criteria at this time. (circle property or unit)  FAILED Based on the findings of the attached inspection report(s) the property mit fails to meet certification at this time (circle property or unit)	Un. m. Junder Title 6, Subjite 8 of the Environment Article, Annotated Code of MD.	Name Cot johns 1393 6/5/20	policinal to inspection contractor.
MARYLAND DEPARTMENT OF THE ENVIRONMENT TION (MDE FORM 330) INSPECTION CERTIFICATE NO.  3250670500 PROPERTY NO. (Include county, gode prefix.) DOWNER NAME TO CITY OF COUNTY STANDARD ST	marked. The following attachments are required to be submitted with the certificate: Form C, laboratory results, and diagrams for Full Risk Redisgned copy of Supervisor's Statement of Work, laboratory results, and diagrams collected for Modified Risk Reduction. Form E for Lead Free, processing fee for each certificate. To be paid to: P.O. Box 1417, Baltimore, MD 21203. The certificate shall be signed by the inspector who p certificates and all required attachments must be submitted to MDE within 10 days following Lead Free and Lead Safe Inspections and within 18 sample results for Full and Modified Risk Reduction Inspections. Copies of all inspection records shall be maintained for at least 5 years by lead penalties will be pursued by MDE for any falsified documentation that is received by MDE. Indicate "0000" if Property Construction Date is unlengated to must mail inspection certificates and the supporting documentation for inspection certificates to: P.O. Box 943, Jessup, MD 20794.  INSPECTION CATEGORIES	3. Modified Risk Reduction	Methods	☐B. Visual Inspection and Dust Inspection	OR	C. Visual Inspection and Dust Inspection with Exterior Waiver	Passing Re-inspection (Form D and Supervisor Statement of Work) required no later than 04/30/ unless otherwise noted in local code.  OR	D. Visual Inspection and Dust Inspection with Lead Free Exterior	I certify that the property/unit meets the certification	y that I inspected the above listed property unit on 1 1 at 2 10 a.m. m. under Title 6, Subjute 8 of the Environment Article, Annotated 6	6/5/20 Kin S each Inspection Contractor Name	ll z
MARYLAND DEPAR  JEAD PAINT RISK REDUCTION (MDE FORM 330)  OBETRACKING NO.  Treet Address  Unit No.	the second in the second category of the second category of the second category of the second category of the second category is an expectation of the second category of the second ca	2. Full Risk Reduction	Methods	A. Dust Inspection	Š.	D. Dust Inspection with Exterior Waiver	Passing Re-inspection (Form D and Supervisor Statement of Work) required no later than 04 / 30 / unless otherwise noted in local code.	E. Dust Inspection with Lead Free Exterior	idings of the attached inspection report(s), dings of the attached inspection report(s).	listed property unit on	My 3592 Accreditation No.	
LEAD PAINT RISK RIOS RIOS AND TRACKING NO.  Street Address  The Maryland accredited lead ins	marked. The following attachmer signed copy of Supervisor's State processing fee for each certificate certificates and all required attacl sample results for Full and Modification penalties will be pursued by MDI contractors must mail inspection	1. Lead Free	Methods	[]A. One Time Only (Interior & Exterior)	OR	B. Limited (Interior Lead Free Only)	Passing Re-inspection required no later than:	Number of Post-1949 Lead Free Units	FAILED Based on the fin	I certify that I inspected the above listed property unit on	Mark Mears Inspector's Signature	33

#### MARYLAND DEPARTMENT OF THE ENVIRONMENT

Land Management Administration • Lead Poisoning Prevention Compliance & Accreditation Division 1800 Washington Blvd. • Suite 630 • Baltimore Maryland 21230 (410) 537-3825 • 1-800-633-6101 x3825 • www.mde.state.md.us

# FORM C- DUST INSPECTION VISUAL REVIEW / DUST SAMPLE COLLECTION & ANALYSIS

The lead paint inspection contractor/inspector is to submit a copy of the Lead Paint Risk Reduction Inspection Certificate (Form 330), with this Form C which includes the diagram; a copy of the lab results to Maryland Department of the Environment and the property owner WITHIN 10 CALENDAR DAYS following the inspection. This form must be fully completed and accurate or the Inspection Certificate may be invalidated. (EA 6-8, COMAR 26.16.02 and 26.16.05)

MDE Tracking No.:	Date of Inspection:	Inspection Certificate No.:
Address of Property Inspected:		
Street Address: 3425 6+6 St.	Unit No.: City: Da	Zip Code: County/City:
Date of Lab Report:	Date Lab Report was Received	by Inspector:

#### PART I – VISUAL REVIEW

Visually review all interior and exterior painted surfaces of unit for chipping, peeling, or flaking paint. If chipping, peeling, or flaking paint is found, corrections must be made before dust samples may be collected. Exterior corrections may be delayed if interior paint condition is satisfactory and an Exterior Waiver is approved.

	INTERIOR	EXTERIOR		
Is Condition of Paint Satisfactory? (circle one in each column)	Yes / No	Yes / No		
Is an Exterior Waiver being used? (circle one)	Yes / (No)			
If Yes, this Certificate expires on: 04/30/	. The property must pa	ss re-inspection no later		
then this date or this inspection certificate will no longer be valid. Name of the approving agency or official				
for the Exterior Waiver:	Form	D with the Cunomicar's		
Statement of Work form must be submitted to MDE a	nd the property owner by t	he lead inspector.		

#### PART II – DIAGRAM

On a separate sheet of paper, provide a diagram of the unit. The diagram is to include: the full site address, street(s) adjacent to the outside entry with the street name(s), location of the unit within a multi-unit property if applicable, window and doorway locations, assigned room numbers, and locations of where dust samples where taken. Show each room within the unit and number each. Your numbering system on your diagram is to match Part III of this form. Note locations of windows with a "W" and sampling locations with an "X". Attach the diagram to this form.

### PART III - DUST COLLECTION & ANALYSIS

After collection of samples in a room, enter the total number of samples that were taken in that room. Attach additional copies of page 2 of this form if there are more rooms than can be accommodated on the back of this form. The "Meets Standard" column requires circling a Yes or No. Under Maryland law, the Lead Risk Reduction Standard for dust is: floors <40; window sills <250; window wells <400 µg/ft². A copy of the Laboratory Analysis Report must be attached to this form. The Result column, below, is for results/concentration of lead in micrograms per square foot (µg/ft²), not Total Lead (µg).

Form Number: MDE/LMA/CER.039

FORM C, PART III Continue	FORM C.	PART	III	Continue	М
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Is this a retest of failed room(s)? (circle one)

Yes /

Inspection Certificate No.:
867531
Page No.:

	SAMPLE No.	AREA (in inches)	RESULT ug/ft <sup>2</sup>
* Field Blank			TESSEL AGIL
T10 1 1 7 1 1 1			

\*Field blank samples are required to be collected per the American Society for Testing and Materials (ASTM) International Standard E 1728 as of May 19, 2008. Field blanks only have to be collected at a minimum frequency of 5 % (or 1 for every 20 field wipe samples collected). Therefore, completion or not of the Field Blank box may vary.

ROOM NO.:		Number of NON-Lead Free windows in room:	Number of <u>Lead Free</u> windows in room:	Total number of windows in room:
SURFACE	SAMPLE No.	AREA (in inches)	RESULT μg/ft <sup>2</sup>	MEETS STANDARD
Floor		1212	< P 6	*
Sill		10 110	- Ge U	Yes / No
Well	3			Yes / No
THE COURSE OF TH	Collected in room:			Yes / No
ROOM NO.:	$\gamma$	Number of NON-Lead Free	Number of <u>Lead Free</u>	Total number of windows

ROOM NO.:	1	Number of NON-Lead Free windows in room:	Number of <u>Lead Free</u> windows in room:	Total number of windows in room:
SURFACE	SAMPLE No.	AREA (in inches)	RESULT µg/ft <sup>2</sup>	MEETS STANDARD
Floor	2	12-112	156	(Yes) / No
Sill		1 4 10	~ 2 <sub>Y</sub> U	
Well	5			Yes / No
<b>Total Samples</b>	Collected in room:			Yes / No

ROOM NO.:	3	Number of NON-Lead Free windows in room:	Number of <u>Lead Free</u> windows in room:	Total number of windows in room:
SURFACE	SAMPLE No.	AREA (in inches)	The state of the s	MEETS STANDARD
Floor	3	12.712		A
Sill		10110	2,0	Yes / No Yes / No
Well				Yes / No
Total Samples	Collected in room: I			103 / 110

ROOM NO.:	4	Number of NON-Lead Free windows in room:	Number of <u>Lead Free</u> windows in room:	Total number of windows in room:
SURFACE	SAMPLE No.	AREA (in inches)	RESULT μg/ft <sup>2</sup>	MEETS STANDARD
Floor	H	12812	- 5.0	Man / NI
Sill		19 V 19	2,10	Yes) / No
Well				Yes / No
Total Samples	Collected in room:			Yes / No

ROOM NO.:	5	Number of NON-Lead Free windows in room:	Number of <u>Lead Free</u> windows in room:	Total number of windows
SURFACE	SAMPLE No.	AREA (in inches)	RESULT µg/ft <sup>2</sup>	in room: () MEETS STANDARD
Floor	5	19-113	<50	(Yes) / No
Sill		10 210	7,40	Yes / No
Well				Yes / No
Total Samples (	Collected in room: /			103 / 110

Accredited Inspector's Name:	Inspector's Accreditation No.:	Date of Inspection:	1/19
Form Number: MDE/LMA/CER.039		7 0	111
Revision Date 00/2011		Page 2 of 2	4

Revision Date 09/2011 TTY Users 1-800-735-2258

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## FORM C, PART III Continued

Is this a retest of failed room(s)?	(circle one)	

Yes	/(No)
	\ /

Insp	ection Certificate No.:
	867531
Page	No.:
	5

	SAMPLE No	. AREA (in inches)	RESULT µg/ft <sup>2</sup>		
* Field Blan		. Inchi (in menes)	RESOLT µg/II		
*Field blank sa Standard E 172	amples are required to be 28 as of May 19, 2008. F	collected per the American So ield blanks only have to be coll , completion or not of the Field	ected at a minimum from	terials (ASTM) Internation uency of 5 % (or 1 for ever	
ROOM NO.:		Number of NON-Lead Free windows in room:  Number of Lead Free windows in room:		Total number of window	
SURFACE	SAMPLE No.	AREA (in inches)	RESULT µg/ft²	MEETS STANDARI	
Floor	6	17 17	<50	Yes / No	
Sill		10 10	<u></u>		
Well				Yes / No	
Total Samples	Collected in room:			Yes / No	
ROOM NO.:	7	Number of NON-Lead Free windows in room:	Number of <u>Lead Free</u> windows in room:	Total number of window	
SURFACE	SAMPLE No.	AREA (in inches)	RESULT µg/ft <sup>2</sup>	MEETS STANDARD	
Floor		12417	< 5.0	(Yes) / No	
Sill		1 2 1 1 2	7,0	Yes / No	
Well				Yes / No	
Total Samples	Collected in room:			103 / 140	
ROOM NO.:	8	Number of NON-Lead Free windows in room:	Number of Lead Free windows in room:	Total number of window in room:	
SURFACE	SAMPLE No.	AREA (in inches)	RESULT μg/ft <sup>2</sup>	MEETS STANDARD	
Floor	8	19719	< 5.0	Yes) / No	
Sill				Yes / No	
Well				Yes / No	
Total Samples	Collected in room:			140 / 110	
ROOM NO.:	<u> </u>	Number of NON-Lead Free windows in room:	Number of <u>Lead Free</u> windows in room:	Total number of windows	
SURFACE	SAMPLE No.	AREA (in inches)	RESULT µg/ft <sup>2</sup>	MEETS STANDARD	
loor				Yes / No	
Sill				Yes / No	
Vell				Yes / No	
otal Samples (	Collected in room:			103 / 110	
ROOM NO.:		Number of NON-Lead Free windows in room:	Number of <u>Lead Free</u> windows in room:	Total number of window in room:	
URFACE	SAMPLE No.	AREA (in inches)	RESULT µg/ft <sup>2</sup>	MEETS STANDARD	
loor				Yes / No	
ill				Yes / No	
Vell				Yes / No	
otal Samples C	Collected in room:			1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

Inspector's Accreditation No.:

Accredited Inspector's Name:
Form Number: MDE/LMA/CER.039
Revision Date 09/2011
TTY Users 1-800-735-2258

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Page 2 of 2

Date of Inspection: /



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: Pauls Lead Inspections LLC

538 East 38th Street

Baltimore, MD 21218

Attn: Paul R. Mears

Email: info@leadinspections.us

Phone: 410-814-0301

Eav .

AAT Project :

481185

Sampling Date :

04/01/2019

Date Received : Date Analyzed :

04/04/2019

Date Reported :

4/4/2019 1:24:30PM

Client Project :

t: ALLIANCE

Project Location: 3425 6TH ST

Lab Sample ID	Client Code	Sample Description	Length (inch)	Width (inch)	Area (Sq ft)	Results Lead µg/ft2 *
4628558	11	LR F	12	12	1.00	<5.00
4628559	2	DEN F	12	12	1.00	<5.00
4628560	3	BA 1 F	12	12	1.00	<5.00
4628561	4	BR 1 F	12	12	1.00	<5.00
4628562	5	KT F	12	12	1.00	<5.00
4628563	6	BR 2 F	12	12	1.00	<5,00
4628564	7	BA 2 F	12	12	1.00	<5.00
4628565	8	BR 3 F	12	12	1.00	<5.00

Analyst Signature

Elyse Bidle

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/S207. The method and batch QC are acceptable unless otherwise stated.

EPA Regulatory Limits: 40 ug/ft2 (Floors, Carpeted/Uncarpeted), 250 ug/ft2 (Window Sil/Stools), 400 ug/ft2 (Window Trough/Well/Ext Concrete Surfaces), HUD Regulatory Limits: 10 ug/ft2 (Interior Floors), 40 ug/ft2 (Vindow Sils), 100 ug/ft2 (Window Troughs).

The laboratory operates in accord with ISO 17025 guidelines and holds limited scopes of accreditation under AlHA-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. \* = Validated modified method Sample data apply only to items analyzed. Reproduction of this document other than in its entirety is not authorized by AAT, LLC. Samples are stored for 30 days following report date.

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

Date Printed: 04/04/2019

AAT Project: 481185



3 Bath RM RW 3425 64L SH

Dasement

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