# Appendix E: Lead-Based Paint

Checklist E1: Guide for Review of Lead-Based Paint Compliance in Properties Receiving Federal Rehabilitation Assistance

Checklist E2: Guide for Review of Lead-Based Paint Compliance in Properties Receiving Acquisition, Leasing, Support Services, or Operations Assistance

Checklist E3: Guide for Review of Lead-Based Paint Compliance in Properties Receiving Tenant-Based Rental Assistance (TBRA)

Checklist E4: Guide for Review of Lead-Based Paint Compliance in Properties Receiving Project-Based Assistance

## Checklist E1: Guide for Review of Lead-Based Paint Compliance in Properties Receiving Federal Rehabilitation Assistance

|  |  |
| --- | --- |
| Name of Monitored Entity: |  |
| Project ID:  |  |
| Name of Project: |  |
| Name of Reviewer: |  |
| Date Completed: |  |

**NOTE:** All questions that address requirements contain the citation for the source of the requirement (statute, regulation, NOFA, or grant agreement). If the requirement is not met, the Reviewer must make a finding of noncompliance. All other questions (questions that do not contain the citation for the requirement) do not address requirements, but are included to assist the reviewer in understanding the Monitored Entity's program more fully and/or to identify issues that, if not properly addressed, could result in deficient performance. Negative conclusions to these questions may result in a "concorn" being raised, but not a "**finding**."

**Instructions:** This Checklist is designed to monitor rehabilitation activities for the program overall and for individual rehabilitation projects. This Checklist is divided into six sections to be used as follows:

* Section A, *Program Reviews*, is for reviewing the program’s overall compliance;
* Section B, *File Review*, is for reviewing requirements that apply to all rehabilitation projects;
* Section C, *Specific Requirements for Levels of Rehabilitation Assistance*, applies based upon the amount of rehabilitation assistance provided for the project file selected for review. This section contains three levels: individual projects receiving rehabilitation assistance up to $5,000 per project; projects receiving rehabilitation assistance over $5,000 and up to $25,000 per unit; and projects receiving rehabilitation assistance over $25,000 per unit;
* Section D applies to rehabilitation in insular areas and
* Section E is included to provide a summary listing of any identified findings or concerns.

The definition of each level of assistance can be found at 24 CFR 35.915. If you select “N/A” for your response, please explain why the question does not apply.

**Questions:**

a. Program review

1.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Does the program consistently and accurately assess projects for possible exemption from the requirements of 24 CFR 35?[24 CFR 35.115] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |

2.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Does the Monitored Entity have staff that is knowledgeable about HUD’s lead-based paint regulations and EPA’s Renovation, Repair, and Painting Rule (RRP)? |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**       |

3.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Does the program ensure that lead safe work and RRP practices are used during rehabilitation work on painted surfaces larger than the *de minimis* amounts [specified in 24 CFR 35.1350(d)] that are known or presumed to have lead, and is all disturbed paint routinely and properly repaired?[24 CFR 35.930(b)(2)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |

4.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Where the Lead Safe Housing Rule requires temporary relocation, does the program ensure that occupants are relocated to units free of lead hazards and their belongings are protected?[24 CFR 35.1345(a)(2)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|  |

5.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Does the program ensure that the Lead Safe Housing Rule (LSHR) and Lead Renovation, Repair, and Painting (RRP) requirements regarding worker and occupant safety are shared with the entities and individuals who perform the rehabilitation work on painted surfaces, such as contractors and subrecipients (e.g., subgrantees, nonprofits, Community Housing Development Organizations, Community Development Corporations, and volunteer groups)?[24 CFR 35.900(a) and (b); 24 CFR 35.1350 and 24 CFR 35.1345] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |

B. individual file review (answer these questions for each project file reviewed.)

|  |
| --- |
| Name of Monitored Entity or Entity Carrying Out the Rehabilitation Project:      |

6.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Was this specific rehabilitation project evaluated for applicability of the Lead Safe Housing Rule and RRP? (If the response is “yes” AND the project meets the regulatory exemption standards, STOP HERE. If “yes” and the project is not exempt, or if “no” (presume the project is not exempt), continue with the remaining questions in this Section B as well as the Section that applies to the level of rehabilitation assistance provided to this project.)[24 CFR 35.115] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |

7.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Was the level of rehabilitationassistance (or total amount of Federal housing assistance) for this project calculated correctly and documented in the project file? [24 CFR 35.915] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |

8.

|  |
| --- |
| Does the project file include the following documents (to be kept for at least three years) necessary to demonstrate compliance with the requirements of the Lead Safe Housing Rule: |
| Documentation of receipt by homeowner or occupantof the Lead Hazard Information and RRP Pamphlets?[24 CFR 35.910(b)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Notices to Residents: Notice of Lead Hazard Evaluation (if paint testing was performed) or a Notice of Presumption (if no paint testing was performed). **NOTE**: If interim controls or abatement are electively performed at this level of rehabilitation assistance, then a Notice of Lead Hazard Reduction must be provided to the residents.[24 CFR 35.910(a)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A paint testing report (if testing was performed) performed by a certified lead-based paint inspector or risk assessor?[24 CFR 35.930(b)(1)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A clearance report showing the unit, or unit and the worksite if the work was contained, passed clearance (if lead-based paint is known or presumed to be in the unit and the amount of material to be disturbed is above the *de minimis* threshold)? [24 CFR 35.1340(c)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |

9.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| a. Was work performed on painted surfaces above the *de minimis* threshold amount where lead-based paint was known or presumed present in the work area? (If the answer is “no,” skip the rest of question 9.) |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |
|  |
| b. Based on your review, were occupants and their belongings protected during work (e.g., documentation of relocation, language in rehabilitation contract, homeowners’ agreement, or other appropriate document)? [24 CFR 35.1345]  |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|  |
| Based on your review, were firms that did the work (this may be the property owner and/or other firms), the supervisors, and workers certified for abatement or RRP, as applicable, with workers using lead safe work or RRP practices as applicable, if the work was larger than the *de minimis* amounts (e.g., on-site reviews during work, a signed certification by the contractor)? **NOTE:** Intent to use lead-safe practices does not satisfy this requirement.[24 CFR 35.930(b)(2)]  |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|       |

c. SPECIFIC REQUIREMENTS FOR REHABILITATION ASSISTANCE (Select the question that applies to the level of assistance provided.)

10. For Rehabilitation Assistance Up to and Including $5,000 Per Unit

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Did the project include paint testing for lead-based paint and, if any was present, repair, using lead safe work practices, of all painted surfaces disturbed during rehabilitation?[24 CFR 35.930(b)(2)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|       |

11. For Rehabilitation Assistance Over $5,000 and Up to $25,000 Per Unit

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| a. Was a risk assessment report obtained or were lead-based paint hazards presumed?[24 CFR 35.930(c)(2)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|  |
| b. Were interim controls conducted or were standard treatments used if hazards were presumed for all paint disturbed and lead-based paint hazards identified in the risk assessment for the property?[24 CFR 35.930(c)(3)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|       |

12. For Rehabilitation Assistance Over $25,000 Per Unit

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| a. Was a risk assessment report obtained or were lead-based paint hazards presumed)?[24 CFR 35.930(d)(2)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|       |
| b. Was abatement conducted of all lead-based paint hazards identified by the risk assessment or presumed to be present, and for paint disturbed by the rehabilitation?[24 CFR 35.980(d)(3)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|  |

D. FOR INSULAR AREAS ONLY. (Answer the question below for projects covered by the Lead Safe Housing Rule. Additional files may need to be selected in order to review for lead-based paint compliance in projects that are covered.)

13.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| a. Based on this review, were firms, supervisors, and workers certified and did workers use lead safe work practices (e.g., on-site reviews during work or a signed certification by the contractor)? **NOTE**: Intent to use lead safe work practices does not satisfy this requirement.[24 CFR 35.940(a) or 24 CFR 35.940(b)(2); 24 CFR 35.1350(b)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|       |
| b. If the rehabilitation assistance was above $5,000 per unit, was a visual assessment for the deteriorated paint performed, and was all deteriorated paint stabilized?[24 CFR 35.940(b); 24 CFR 35.1340] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|       |
| c. Did the clearance report show the unit (or the worksite, if it was contained) passed clearance (if lead-based paint is known or was presumed to be in the unit and the amount of material to be disturbed was above the *de minimis* threshold)?[24 CFR 35.940(a)(2) or 24 CFR 35.940(b)(3); 24 CFR 35.1340] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|       |

E. CHECKLIST SUMMARY:

14.

|  |
| --- |
| For any findings or concerns identified in this Checklist, list the number of the question below in the appropriate column: |
| **Finding Question #: Concern Question #:** |
|             |

## Checklist E2: Guide for Review of Lead-Based Paint Compliance in Properties Receiving Acquisition, Leasing, Support Services, or Operations Assistance

|  |  |
| --- | --- |
| Name of Monitored Entity: |  |
| Project ID:  |  |
| Name of Project: |  |
| Name of Reviewer: |  |
| Date Completed: |  |

**NOTE:** All questions that address requirements contain the citation for the source of the requirement (statute, regulation, NOFA, or grant agreement). If the requirement is not met, the Reviewer must make a finding of noncompliance. All other questions (questions that do not contain the citation for the requirement) do not address requirements, but are included to assist the reviewer in understanding the Monitored Entity's program more fully and/or to identify issues that, if not properly addressed, could result in deficient performance. Negative conclusions to these questions may result in a "concern" being raised, but not a "**finding**."

**Instructions:** This Checklist is designed to monitor programs involving acquisition (including homebuyer assistance), leasing, support services, or operations. Examples of this type of assistance include, but are not limited to: downpayment assistance, acquisition or leasing of a homeless facility, or payment of security deposits. Other examples are payment of the day-to-day expenses of housing for the homeless, and assistance for various support services that are provided on-site at a residential facility. The Checklist is divided into four sections:

Section A, *Program Review*, for reviewing the program’s overall compliance;

Section B, *File Review*, for requirements that apply to all projects;

Section C, *Checklist* Summary, for a summary listing of any identified findings or concerns.

**Questions:**

A.Program review

1.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Does the program consistently and accurately assess projects for possible exemption from the requirements of the Lead Safe Housing Rule and EPA’s Renovation, Repair, and Painting (RRP) Rule (40 CFR 745, subparts E, Q)?[24 CFR 35.115] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |

2.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Does the program Monitored Entity have staff who are knowledgeable about HUD’s lead-based paint regulations and EPA’s RRP Rule? |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |

3.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Does the Monitored Entity have documentation of receipt by homeowner or occupantof the Lead Hazard Information before purchase or rental of target housing, and RRP Pamphlets before the target housing is rehabilitated, renovated, repaired or painted?[24 CFR 35.1010(b)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|  |

4.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Are visual assessments for deteriorated paint being conducted in all units subject to the Lead Safe Housing Rule and EPA’s RRP Rule?[24 CFR 35.1015(a)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|  |

5.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| If the Monitored Entity was the seller or lessor of target housing, does the project file include the Lead Disclosure Rule’s lead warning statement, disclosure of known information on lead-based paint, and acknowledgement of receipt of this information by the buyer or lessee? |

|  |  |  |
| --- | --- | --- |
|  [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|       |

6.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| If the Monitored Entity provides Federal assistance for both acquisition and rehabilitation of a unit, does the Monitored Entity follow the requirements of Subpart J, Rehabilitation? (Use Checklist E1: *Guide for Review of Lead-Based Paint Compliance in Properties Receiving Federal Rehabilitation Assistance*, to determine compliance.)[24 CFR 35.900(a)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|       |

7.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| After paint stabilization above the *de minimis* amounts [specified in 24 CFR 35.1350(d)], is clearance consistently performed by a lead-based paint inspector or risk assessor independent of the firm conducting the work, and passed prior to occupancy or immediately after receipt of Federal assistance?[24 CFR 35.1015(b)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |
|  |

8.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Does the program ensure that applicants are not being denied services based on familial status or disability, and that required activities are being performed on pre-1978 dwelling units occupied by children less than age six when triggered by the regulation? **NOTE**: The Fair Housing Act prohibits denial of services based on familial status (presence of children under age 18) or disability.[24 CFR 100.50(b)(2); 24 CFR 35.1015] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |
|  |

B. FILE REVIEW (Answer these questions for each project file reviewed.)

|  |
| --- |
| **Name of Monitored Entity Providing the Assistance:**      |

9.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Was this project evaluated for applicability of the Lead Disclosure Rule, the Lead Safe Housing Rule, and EPA’s Renovation, Repair, and Painting (RRP) Rule? (If the response is “yes” AND the project meets the regulatory exemption standards, STOP HERE. If “yes” and the project is not exempt, or if “no” (presume the project is not exempt), continue with the remaining questions.)[24 CFR 35 Subpart A and 24 CFR 35.115] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |

10.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Is there documentation in the file that the occupants of the unit(s) in the assisted property were provided the pamphlet, “Protect Your Family from Lead in Your Home,” at move-in or immediately after the assistance was provided (e.g., a signed copy of the pamphlet or a signed disclosure form), and that occupants consistently receive copies of the EPA-HUD Renovate Right brochure before the target housing is rehabilitated, renovated, repaired or painted?[24 CFR 35.1010(b)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |

11.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Was a visual assessment of the assisted unit, common areas and exterior for deteriorated paint performed by an appropriately trained individual, i.e., a certified lead-based paint inspector, or risk assessor, or person successfully trained in HUD’s visual assessment course (e.g., as documented by visual assessment report or field notes)? [24 CFR 35.1015(a)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |
|  |

12.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| a. If paint stabilization above the *de minimis* amounts was performed, is there documentation in the file that the paint stabilization was performed by certified renovation firms, supervisors and workers using lead safe work practices (e.g., language in the work write-up, contract with workers, or signed notice of training completion)? **NOTE:** Intent to use such practices does not satisfy this requirement.[24 CFR 35.1015(b); 24 CFR 35.1330(a)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|       |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| b. Based on your review, were occupants and their belongings protected during work (e.g., documentation of relocation, language in rehabilitation contract, homeowners’ agreement, or other appropriate document)?[24 CFR 35.1345] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|       |

13.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| If paint stabilization above the *de minimis* amount was performed, is there documentation in the file that the paint stabilization was performed before occupancy of a vacant dwelling unit or where a unit is occupied, immediately after receipt of Federal assistance?[24 CFR 35.1015(b); 24 CFR 35.1010(a)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|       |

14.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| If the visual assessment identified deteriorated paint above the *de minimis* amounts, is there a clearance report by a clearance examiner (a lead-based paint inspector or risk assessor) independent of the firm conducting the work, in the file that documents that all paint was stabilized and that the work areas passed clearance? [24 CFR 35.1015(b)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|       |

15.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| If paint stabilization above the *de minimis* amounts was performed, is there documentation that a Notice of Lead Hazard Reduction was provided to the affected occupants within 15 days? [24 CFR 35.1015(d)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|       |

C. CHECKLIST SUMMARY

16.

|  |
| --- |
| For any findings or concerns identified in this Checklist, list the number of the question below in the appropriate column: |
| **Finding Question #: Concern Question #:** |
|             |

## Checklist E3: Guide for Review of Lead-Based Paint Compliance in Properties Receiving Tenant-Based Rental Assistance (TBRA)

|  |  |
| --- | --- |
| Name of Monitored Entity: |  |
| Project ID:  |  |
| Name of Project: |  |
| Name of Reviewer: |  |
| Date Completed: |  |

**NOTE:** All questions that address requirements contain the citation for the source of the requirement (statute, regulation, NOFA, or grant agreement). If the requirement is not met, the Reviewer must make a finding of noncompliance. All other questions (questions that do not contain the citation for the requirement) do not address requirements, but are included to assist the reviewer in understanding the Monitored Entity's program more fully and/or to identify issues that, if not properly addressed, could result in deficient performance. Negative conclusions to these questions may result in a "concern" being raised, but not a "**finding**."

**Instructions:** This Checklist is designed to evaluate compliance with lead hazard requirements applicable to CPD programs that provide Tenant-Based Rental Assistance (TBRA). This Checklist is divided into three sections:

* Section A, *Program Review*, for reviewing the program’s overall compliance;
* Section B, *File Reviews*, for reviews of requirements applicable to all projects; and
* Section C, *Checklist* Summary, for a summary listing of any identified findings or concerns.

**Questions:**

a. program review

1.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Does the program consistently and accurately assess units for the applicability of the Lead Safe Housing Rule EPA’s Renovation, Repair, and Painting (RRP) Rule (40 CFR 745, subparts E, Q) document exemptions? [24 CFR 35.1–5 **-** Exemptions**;** 24 CFR 35.1200(–) **-** Applicability to TBRA units with child under age six] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |

2.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Do participating jurisdictions consistently provide copies of the Lead Hazard Information before rental or sale, and EPA’s Renovate Right brochure before RRP work, to occupants of assisted households? [24 CFR 35.1210(b)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |

3.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Does the program conduct visual assessments for deteriorated paint and/or risk assessments in all units covered by the Lead Safe Housing Rule? [24 CFR 35.1215(a)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|  |

4.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Based on your review, were firms certified and their supervisors and workers supervised in lead abatement or RRP, and did workers use lead-safe work and RRP work practices on work larger than *de minimis* amounts (e.g., on-site reviews during work or a signed certification by the contractor)? **NOTE:** Intent to use such practices does not satisfy this requirement.[24 CFR 35.1215(b); 24 CFR 35.1330(a)(4); 24 CFR 35.1350(d)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |
|  |

5.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Is clearance consistently performed by a lead-based paint inspector or risk assessor independent of the firm conducting the work, and passed after paint stabilization on projects larger than *de minimis* amounts? [24 CFR 35.1215(b)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |
|  |

6.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Is the Notice of Lead Hazard Reduction consistently provided to assisted households within 15 days after the work? [24 CFR 35.1215(c)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |
|  |

7.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Does the program ensure that owners of units occupied by one or more children under age six incorporate ongoing lead-based paint maintenance activities into regular building operations for those units and the common areas servicing those units? [24 CFR 35.1220] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|  |

8.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Does the program take appropriate action when a child under age 6 with an environmental intervention blood lead level (20 µG/dL, or two readings of 15 µG/dL 3 or more months apart) is identified, including proper evaluation (risk assessment within 15 days of notice by health department or other medical health care provider), reduction of hazards (within 30 days of owner’s receipt of risk assessment), and notification steps (evaluation and hazard reduction within 15 days of the activity)? [24 CFR 35.1225] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |
|  |

9.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Does the program share housing data with the local health department on a quarterly basis in an attempt to match assisted unit addresses with lead-poisoned children?[24 CFR 35.1225(f)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |
|  |

10.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Does the program have staff who are knowledgeable about HUD’s lead-based paint regulations? |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|  |

11.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Does the program ensure that applicants are not being denied assistance or services based on familial status or disability and that pre-1978 homes of families with children less than age six are being inspected and treated for lead hazards when triggered by the regulation? **NOTE**: The Fair Housing Act prohibits denial of services based on familial status (presence of children under age 18) or disability. [24 CFR 100.50(b)(2); 24 CFR 35.1215] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|  |

b. file review

|  |
| --- |
| **Name of Entity Providing the Assistance:**      |

 12.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Was this project evaluated for applicability of the Lead Safe Housing Rule? (If the response is “yes” AND the project meets the regulatory exemption standards, STOP HERE. If “yes” and the project is not exempt, or “no” (presume the project is not exempt), continue with the remaining questions in this Section.)[24 CFR 35.115] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |

13.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| In units that are not otherwise exempt, the LBP requirements for Tenant-Based Rental Assistance apply only to units with children under age six and common areas servicing those units. Based on your review, is there evidence of occupancy in the assisted household by a child under age six or evidence such a child is expected to reside there (upcoming family tenancy, family has a pregnant woman, child is relocating in, etc.)? **NOTE:** If there is no child under age six residing or expecting to reside there, stop the file review at this point.If there is a child under age six residing there, or such a child is expected to reside there, the unit is covered by the rule. Continue with the remaining questions in this Section.) [24 CFR 35.1200(b)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |

14.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Is there documentation in the file that visual assessments of the unit for deteriorated paint, or risk assessments, were performed at the initial and periodic inspections (e.g., HUD inspection form, visual assessment report or field notes)? [24 CFR 35.1215(a)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |

15.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| If paint stabilization above the *de minimis* amount was performed, is there documentation in the file that the family received the EPA Renovate Right pamphlet before the work, paint stabilization was performed by certified renovation firms, supervisors and workers using lead safe work practices (e.g., language in the work write-up, contract with workers, or signed certification of training)? **NOTE**: Intent to use such practices does not satisfy this requirement.[24 CFR 35.1330(a)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|       |

16.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| If the visual assessment or risk assessment identified deteriorated paint above the *de minimis* amount, is there a clearance report in the file that documents that all paint was stabilized and that the work areas passed clearance before a family was allowed to occupy the unit? [24 CFR 35.1215(b)]  |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|       |

 17.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| If paint stabilization above the *de minimis* amount was performed, is there documentation that the assisted household received a Notice of Lead Hazard Reduction within 15 days after the work? [24 CFR 35.1215(c); 24 CFR 35.1210(a)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|       |

 18.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| If a child under age 6 with an environmental intervention blood lead level (20 µG/dL, or two readings 15 µG/dL 3 or more months apart) was living in the assisted unit, were the proper evaluation (risk assessment within 15 days of notice by health department or other medical health care provider), reduction of hazards (within 30 days of owner’s receipt of risk assessment), and notification steps (evaluation and hazard reduction within 15 days of the activity) taken? [24 CFR 35.1225] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|       |

C. CHECKLIST SUMMARY

19.

|  |
| --- |
| For any findings or concerns identified in this Checklist, list the number of the question below in the appropriate column: |
| **Finding Question #: Concern Question #:** |
|   |

## Checklist E4: Guide for Review of Lead-Based Paint Compliance in Properties Receiving Project-Based Assistance

|  |  |
| --- | --- |
| Name of Monitored Entity: |  |
| Project ID:  |  |
| Name of Project: |  |
| Name of Reviewer: |  |
| Date Completed: |  |

**NOTE:** All questions that address requirements contain the citation for the source of the requirement (statute, regulation, NOFA, or grant agreement). If the requirement is not met, the Reviewer must make a finding of noncompliance. All other questions (questions that do not contain the citation for the requirement) do not address requirements, but are included to assist the reviewer in understanding the Monitored Entity's program more fully and/or to identify issues that, if not properly addressed, could result in deficient performance. Negative conclusions to these questions may result in a "concern" being raised, but not a **"finding.**"

**Instructions:** This Checklist is designed to evaluate compliance with lead hazard requirements in pre-1978 multifamily properties receiving Project-Based Assistance (PBA). The regulations apply only to the assisted units in covered properties and the common areas servicing those units under any project-based assistance program.

This Checklist is divided into three sections:

* Section A, *Program Review*, for reviewing the program’s overall compliance;
* Section B, *File Review*, for reviewing requirements applicable to all projects. These questions focus on the owner’s lead hazard control program for the property; and
* Section C, *Checklist* Summary, for a summary listing of any identified findings or concerns.

**Questions:**

A. PROGRAM REVIEW

1.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Does the program ensure that owners consistently and accurately assess units for the applicability of the Lead Safe Housing Rule and EPA’s Renovation, Repair, and Painting (RRP) Rule (40 CFR 745, subparts L, Q) document exemptions?[24 CFR 35.115 – Exemptions; 24 CFR 35.700] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |

2.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Does the program consistently ensure that owners provide copies of the Lead Hazard Information (“Protect Your Family from Lead Hazards in Your Home”) pamphlet and EPA “Renovate Right” RRP Brochure to occupants of assisted units?[24 CFR 35.710(b)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |

B. FILE REVIEW (Answer these questions for each project file reviewed.)

|  |
| --- |
| Name and Address of Owner and Property that received project-based assistance:      |

3.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| a. Identify lead hazards (check the box being responded to based on the level of assistance provided): - *PBRA assistance up to $5,000 per unit per year average*: visual assessment for deteriorated paint (or risk assessment); ***OR*** - *PBRA assistance more than $5,000 per unit per year average*: risk assessment.[24 CFR 35.720(a); 24 CFR 35.715(a)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| b. Documentation of receipt **by occupant** of the Lead Hazard Information and RRP Pamphlets?[24 CFR 35.710(b)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| c. (Check the box being responded to based on the PBRA level.) - *PBRA assistance up to $5,000 per unit per year average*: Procedure for performing paint stabilization of deteriorated paint, with an ongoing LBP maintenance program? ***OR*** - *PBRA assistance over $5,000 per unit per year average*: Procedure for performing lead hazard control, either interim controls or abatement, with an ongoing LBP maintenance program?[24 CFR 35.175(a) and (b) and 24 CFR 35.720(a) and (b)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| d. Notices to Residents: Notice of Lead Hazard Evaluation (when paint testing or risk assessment is performed) or Lead Hazard Reduction (when interim controls or abatement is performed), received within 15 days of the activity?[24 CFR 35.710(a)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| e. Documentation of use of lead safe work and RRP practices by certified renovation firms, supervisors and workers, and certified maintenance personnel during all paint-disturbing work above *de minimis* amounts, including interim controls and ongoing lead-based paint maintenance activities?[24 CFR 35.715(b) and (c); 24 CFR 35.720(b); 24 CFR 35.1330(a)(4)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| f. A clearance report prepared by a lead-based paint inspector or risk assessor independent of the firm conducting the work, for all work above the *de minimis* amounts? [24 CFR 35.715(b); 24 CFR 35.720(a)(2) and 24 CFR 35.1340(c)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| g. Complete response to a child under age 6 having an environmental intervention blood lead level (20 µG/dL, or two readings 15 µG/dL 3 or more months apart), including proper evaluation (risk assessment within 15 days of notice by health department or other medical health care provider), reduction of hazards (within 30 days of owner’s receipt of risk assessment), and notification steps (evaluation and hazard reduction within 15 days of the activity)?[24 CFR 35.730] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| h. Ongoing lead-based paint maintenance and reevaluation (check the box being responded to based on the PBRA level.): - *PBRA assistance up to $5,000 per unit per year average*: Procedure for obtaining visual assessment for deteriorated paint at turnover or annually, and performing paint stabilization? ***OR*** - *PBRA assistance over $5,000 per unit per year average*: Procedure for obtaining a lead reevaluation every other year, and performing lead hazard control based on the reevaluation?[24 CFR 35.175(a) and (b), 24 CFR 35.720(a) and (b), and 24 CFR 35.1355(b) and (c)] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:**      |

4.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Does the Monitored Entity ensure that applicants are not being denied housing based on familial status and that pre-1978 homes of families with children up to age 18 are being tested and treated for lead hazards when triggered by the regulation? **NOTE** that the lead-based paint requirements apply to all pre-1978 units receiving project-based assistance that are not otherwise exempt from the rule, and are not restricted to only those units occupied by children under age 6. The Fair Housing Act prohibits denial of services, including Federally funded housing rehabilitation, based on familial status (presence of children under age 18) or disability.[24 CFR 100.50(b); 24 CFR 35.700] |

|  |  |  |
| --- | --- | --- |
| [ ]  | [ ]  | [ ]  |
| **Yes** | **No** | **N/A** |

 |
| **Describe Basis for Conclusion:** |
|  |

C. CHECKLIST SUMMARY

5.

|  |
| --- |
| For any findings or concerns identified in this Checklist, list the number of the question below in the appropriate column: |
| **Finding Question #: Concern Question #:** |
|             |