PROJECT SUMMARY SHEET FOR MULTI-FAMILY PROJECTS

INSTRUCTIONS: Complete this Project Cover Sheet and the forms contained in this bundle will auto-populate. The Project Cover Sheet does not contain all the fields needed to completely populate forms. Review the forms, provide missing data. Forms not contained in the bundle can be downloaded from the CAA Portal.

PROP	ERTY
Multi-Family (and Single Family Rentals) # Units	Does Owner reside at the property? \Box Yes \Box No
Property Address:	Are children under 6 at the property? Yes No Are children covered by MaineCare? Yes No Is property under abatement order? Yes No
Applicant (Owner)	Co-Applicant (Co-Owner)
Entity or Owner First Name MI Last Name Mailing Address: Street, City, State, Zip Home Phone Work Phone Email	Co-Entity or Co-Owner First Name MI Last Name Mailing Address: Street, City, State, Zip Home Phone Work Phone Email
COMMUNITY ACTION AGENCY (CAA/ESCROW AGENT)	LEAD REDUCTION/ABATEMENT CONTRACTOR
CAA Name	Company Name
Mailing Address	Mailing Address
Street, City, State, Zip	Street, City, State, Zip
CAA Rep Name	Phone
CAA Rep Phone	Rep Name
CAA Rep Email	Rep Phone
CAA Rep Title Lead Designer Name	Rep Email
Load Designer Dhane	
Lead Designer Fax	NOTES/COMMENTS
Lead Designer Email	

TENANT INFORMATION

		UNIT 1					UNIT 2		
Tenant Name	First MI L	ast			Tenant Name	First, MI	l ast		
Co-Tenant Name	i not ivi i	2001			Co-Tenant Name	i not, ivi	Luot		
Apt/Unit #	First MI L	_ast			Apt/Unit #	First MI L	ast		
Mailing Address					Mailing Address				
Maining Address		Street. C	City, State, Zip		Mailing Address		Street.	City, State, Zip	
Home Phone		, -	3 ,, 1		Home Phone		,	, , , ,	
Work Phone					Work Phone				
Email					Email				
Are children under	r 6 in the	e unit?	🗆 Yes	🗆 No	Are children under	6 in the u	ınit?	□ Yes	🗆 No
Are children cover	ed by M	laineCare?	🗆 Yes	🗆 No	Are children covere	d by Mai	neCare?	□ Yes	🗆 No
Household Size:			AMI:		Household Size:			AMI:	
Maximum Elisible I		¢			Maximum Eligible II	ncome:	\$		
Maximum Eligible I Funding	income:	\$ Interior	Exterior	Total	Funding		Interior	Exterior	Total
Federal Lead Grant		Interior	Exterior	Total	Federal Lead Grant		Interior	Exterior	TOLAI
Healthy Homes Gran	nt				Healthy Homes Gra				
Federal Lead Owner					Federal Lead Owne				
Obligation					Obligation				
Federal Lead Total					Federal Lead Tota	I			
State Lead Grant					State Lead Grant				
State Lead Owner M					State Lead Owner				
State Lead Owner Ol DHHS	bligation				State Lead Owner (DHHS	Dbligation			
State Lead Total					State Lead Total				
Leveraged Funds					Leveraged Funds				
UNIT TOTAL					UNIT TOTAL				
		UNIT 3					UNIT 4		
Tenant Name					Tenant Name		-		
	First MI I	_ast			ronant namo	First, MI	Last		
Co-Tenant Name					Co-Tenant Name				
	First MI I	_ast				First MI L	_ast		
Apt/Unit #					Apt/Unit #				
Mailing Address		Street	City, State, Zip	<u> </u>	Mailing Address		Street	City, State, Zip	
Home Dhone		<i>Sireei,</i>		,	Hama Dhana		011001,	ony, otate, zip	
Home Phone Work Phone					Home Phone Work Phone				
Email					Email				
Are children under	r 6 in the	unit?	□ Yes	□ No	Are children under	6 in the i	init?	□ Yes	🗆 No
Are children cover				No	Are children covere				
Household Size:			AMI:		Household Size:			AMI:	
Maximum Eligible I	Incomo:	\$			Maximum Eligible I	ncome:	\$		
Funding			Exterior	Total	Funding		Interior	Exterior	Total
Federal Lead Grant					Federal Lead Grant				
Healthy Homes Gran	nt				Healthy Homes Gra	ant			
Federal Lead Owner					Federal Lead Owne	er			
Obligation Federal Lead Total					Obligation Federal Lead Tota				
State Lead Grant					State Lead Grant				
State Lead Owner M	atch				State Lead Owner	Match			
State Lead Owner O					State Lead Owner (
DHHS	Siguion				DHHS	Sigaton			
State Lead Total					State Lead Total				
Leveraged Funds					Leveraged Funds				
UNIT TOTAL					UNIT TOTAL				

TENANT INFORMATION

	UNIT 5		
Tenant Name			
First MI L	.ast		
Co-Tenant Name First MIL	ast		
Apt/Unit #			
Mailing Address			
.	Street, 0	City, State, Zip	
Home Phone			
Work Phone			
Email			
Are children under 6 in the	unit?	□ Yes	🗌 No
Are children covered by M	aineCare?	🗌 Yes	□ No
Household Size:		AMI	:
Maximum Eligible Income:	\$		
Funding	Interior	Exterior	Total
Federal Lead Grant			
Healthy Homes Grant			
Federal Lead Owner Obligation			
Federal Lead Total			
State Lead Grant			

UNIT TOTAL		
Leveraged Funds		
State Lead Total		
DHHS		
State Lead Owner Obligation		
State Lead Owner Match		

UNII 7

Tenant Name			
F	irst MI Last		
Co-Tenant Name			
F	irst MI Last		
Apt/Unit #			
Mailing Address			
_	Stre	et, City, State, Zip	1
Home Phone			
Work Phone			
Email			
Are children under	6 in the unit?	🗌 Yes	🗆 No
Are children covere	d by MaineCare?	□ Yes	🗆 No
Household Size:		AMI:	
Maximum Eligible In	come: \$		
Funding	Interior	Exterior	Total
Federal Lead Grant			
Healthy Homes Grant			
Federal Lead Owner			

		UNIT 6		
Tenant Name				
	First, MI	Last		
Co-Tenant Name				
	First MI L	_ast		
Apt/Unit # Mailing Address				
Maining Address		Street,	City, State, Zip	
Home Phone				
Work Phone				
Email				
Are children under 6	in the u	unit?	□ Yes	🗌 No
Are children covered	l <u>by</u> Mai	neCare?	□ Yes	🗌 No
Household Size:			AMI:	
Maximum Eligible In	come:	\$		
Funding		Interior	Exterior	Total
Federal Lead Grant				
Healthy Homes Grar	nt			
Federal Lead Owner Obligation				
Federal Lead Total				
State Lead Grant				
State Lead Owner M	latch			
State Lead Owner O	bligation			
DHHS				
State Lead Total				
Leveraged Funds				
UNIT TOTAL				
		UNIT 8		
Tenant Name	First, MI	last		
Co-Tenant Name	1 1131, 111	Last		
	First MI I	_ast		
Apt/Unit #				
Mailing Address		.		
		Street,	City, State, Zip	
Home Phone				
Work Phone				
Email				□ No
Are children under 6			∐ Yes □ Yes	
Are children covered Household Size:	a <u>by</u> ivial	necare?	res AMI:	
Maximum Eligible In	come.	\$		
Funding	come.		Exterior	Total
Federal Lead Grant		Interior	LAterior	Total
Healthy Homes Gran	nt			
Federal Lead Owner				
Obligation Federal Lead Total				
State Lead Grant				
State Lead Owner M	atch			
State Lead Owner O				
DHHS				
State Lead Total				
Leveraged Funds				
UNIT TOTAL				

TENANT INFORMATION

	UNIT 9				UNIT 10		
Tenant Name	act			Tenant Name	ast		
Co-Tenant Name	-431			Co-Tenant Name	Last		
First MI L	ast			First MI L	.ast		
Apt/Unit #				Apt/Unit #			
Mailing Address				Mailing Address			
	Street, C	City, State, Zip			Street,	City, State, Zip	
Home Phone				Home Phone			
Work Phone				Work Phone			
Email				Email			
Are children under 6 in the	e unit?	🗌 Yes	🗆 No	Are children under 6 in the u	init?	🗌 Yes	🗆 No
Are children covered by M	aineCare?	☐ Yes		Are children covered by Mai		□ Yes	□ No
Household Size:		AMI:		Household Size:		AMI:	
Maximum Eligible Income:	\$			Maximum Eligible Income:	\$		
Funding	Interior	Exterior	Total	Funding	Interior	Exterior	Total
Federal Lead Grant				Federal Lead Grant			
Healthy Homes Grant				Healthy Homes Grant			
Federal Lead Owner				Federal Lead Owner			
Obligation Federal Lead Total				Obligation Federal Lead Total			
State Lead Grant				State Lead Grant			
State Lead Owner Match				State Lead Owner Match			
State Lead Owner Obligation							
DHHS				State Lead Owner Obligation DHHS			
State Lead Total				State Lead Total			
Leveraged Funds				Leveraged Funds			
UNIT TOTAL				UNIT TOTAL			

PROJECT FUNDING SUMMARY

Project	Funding	Agreement/Constru	ctions Contract
Federal Lead Grant	\$	Grant Amount	\$
Healthy Homes Grant	\$	Contract Amount	\$
Federal Owner Obligation	\$	Contract/Agreement Date	
Federal Lead Total	\$	Interior Start Date	
		Interior End Date	
State Lead Grant	\$	Exterior Start Date	
State Lead Owner Match	\$	Exterior End Date	
State Lead Owner Obligation	\$		
DHHS	\$	Change C	Orders
State Lead Total	\$	Federal Lead Change Order #1	\$
Leveraged Funds	\$	Federal Lead Change Order #2	\$
		State Lead Change Order #1	\$
State Lead I	Match Criteria	State Lead Change Order #2	\$
□ 10% Non-Abatement	25% Abatement D Waived	Final Contract Amount	\$
Total Owner Obligation	\$	PROJECT TOTAL	\$

Click boxes if there are funds. Check boxes will auto-populate.

Funding Source	Total Interior	Total Exterior	Total
Federal Lead Grant	\$	\$	\$
Healthy Homes Grant	\$	\$	\$
Federal Lead Additional Project Costs (Owner Obligation)	\$	\$	\$
State Lead Grant	\$	\$	\$
State Lead Owner Match	\$	\$	\$
State Lead Additional Project Costs (Owner Obligation)	\$	\$	\$
DHHS	\$	\$	\$
CONTRACT AMOUNT	\$	\$	\$
Leveraged Funds	\$	\$	\$
PROJECT TOTAL	\$	\$	\$

PHASE 2- MULTI-FAMILY DOCUMENT CHECKLIST

Applicant (Owner) Property Address			CAA Date Submitted		
Program Type(s):	Federal Lead	☐ State Lead (N261)	Healthy Homes	DHHS	

	Document Reference	FEDERAL LEAD	STATE LEAD	HEALTHY HOMES
FILE SECTION 1 (Owner)				
Recorded Declaration of Covenants and Restricts	CAA	X	Х	
FILE SECTION 2 (Invoices, Checklists, Waiver, Tenant)				
Phase 2 Billing Invoice	Appendix 1A	Х	Х	Х
Phase 2 Multi-Family Document Checklist	Appendix 1B-MF2	Х	Х	Х
Project Summary Sheet (updated)	Appendix 1	Х	Х	Х
Relocation and travel receipts	CAA			
FILE SECTION 3 (Contractor)				
Contractor Payment Request(s) including Contractor invoices	Appendix I-C	X	Х	Х
Contractor Certificate and Release of Liens	Appendix I-B	X	Х	Х
Certificate of Final Inspection	Appendix Q	Х	Х	Х
Change Order (if applicable)	Appendix N	X	Х	Х
FILE SECTION 5 (Federal and State Compliance, Healthy Homes)				
DEP Notification and Clearance	DEP Form	Х	Х	
Dust Wipe Clearance Results	CAA	X	Х	
Lead Paint Plus Essential Maintenance Practice Plan	Appendix R	X	Х	
Letter of Lead Hazard Reduction Compliance	Appendix P	Х	Х	
Occupant Protection Plan	Contractor	Х	Х	
HUD Quarterly Report: Supplemental Information Worksheet	Appendix R1	X		
HUD Section 3 Verification Data and CPOII Pilot Program Form	Appendix R3	X		
Healthy Homes HRRS Assessment Report (if applicable)	CAA			Х
FILE SECTION 6 (Photos, Correspondence)				
Colored Photo(s) (in progress and completed)	CAA	Х	Х	Х
Correspondence	CAA/MHSA	Х	Х	Х

CAA certifies that the originals of all documents listed are retained with the project file located at the CAA office. CAA further certifies that documents not included on this Checklist, but are required by program regulations as referenced in the MaineHousing's *Lead Program Guidance and Procedures*, are maintained in the Applicant(s) project file at the CAA's office. These documents are subject to periodic inspection by MaineHousing.

CAA Representative Signature

Date

CAA Representative Name

CONTRACTOR CERTIFICATE AND RELEASE OF LIENS

Project Funding:	□ State Lead	Federal Lead	Healthy Homes	DHHS	Project Type:	□ Single-Family	Multi-Family
Agency (CAA):				CAA Rep N	lame:		
				CAA Rep Title:			
				CAA Rep Phone:			
				CAA Rep Email:			
Applicant (Owne	r):		Co	-Applicant:			
Property:			Co	ontractor:			
			Co	ontract Amou	int: \$		
			Co	Contract Date:			

Regarding the *Construction Contract* ("Contract") entered into between the Applicant and Contractor identified above, for work performed on the above-referenced Property in accordance with the agreed upon project specifications, the Contractor certifies/states as follows:

- 1. \$______ is due from and payable by the Applicant to the Contractor pursuant to the Contract and duly approved *Change Orders* and modifications.
- 2. All work invoiced under the Contract has been performed in accordance with the terms thereof, and that there are no unpaid claims for materials, supplies or equipment and no claims of laborers or mechanics for unpaid wages arising out of the performance of the Contract.
- 3. That upon receipt of the payment stated in Paragraph 1 hereof, the Contractor does hereby release the Applicant from any and all claims arising under or by virtue of this invoiced amount; provided, however, that if for any reason the Applicant does not pay in full the amount stated in Paragraph 1 hereof, the unpaid amount will become the amount which the Contractor has not released.

Contractor Representative Signature

Contractor Representative Name

Acknowledged by:

Applicant (Owner) Signature

Co-Applicant (Co-Owner) Signature

Date

Date

Date

CONTRACTOR PAYMENT REQUEST

Project Funding: State Lead Federal Lead Healthy Ho	mes DHHS Project Type: Single-Family Multi-Family CAA Rep Name: CAA Rep Title: CAA Rep Phone: CAA Rep Email:
Applicant (Owner):	Co-Applicant:
Property:	Contractor:
	Contract Amount: \$ Contract Date:
TYPE OF PAYMENT: Final Progress	% of work completed as outlined in the Contract
CONTRACTOR:	
I hereby request an inspection to receive payment #	for the amount of \$
I certify that I have satisfactorily completed the necessary wattached.	ork to justify this request. Cost breakdown/invoice(s)
Contractor Representative Signature	Date
Contractor Representative Name	-
LEAD DESIGNER / RISK ASSESSOR:	
I hereby certify that all work is completed as indicated on the with all applicable specifications and standards. I hereby rec following amount:	
Payment Amount \$	_
Lead Designer/Risk Assessor Signature	Date
Lead Designer/Risk Assessor Name	-
OWNED	
OWNER:	
 Your signature on this Payment Request form means that you The materials being billed for this project have been 	
 The work being billed for this project phase has actu 	ually occurred.
 You are satisfied with the work that the Contractor h You are requesting payment to the Contractor for th 	
	to you and you understand this payment request process.
If you have concerns about the work being done to your Action Agency before signing this form.	

Owner Signature

Co-Owner Signature

Date

Date

LETTER OF LEAD HAZARD REDUCTION COMPLIANCE

Project Funding:	State Lead	Federal Lead	Healthy Homes	, DHHS	Project Type: D Single-Family	Multi-Family
Agency (CAA):				CAA Re	ep Name:	
				CAA Rep 1	Title:	
			hone:			
				CAA Rep E	mail:	
Applicant (Owne	r):		C	o-Applicant:		
Property:			C.	ontractor:		
Unit #s:			In	spection Dat	e:	

TO: Property Owner(s)

This letter is to certify that I inspected the above referenced Property relevant common areas and exterior areas for lead hazard reduction compliance on the above referenced Inspection Date and on that date those surfaces treated as specified in the Design Plan for the above referenced Property were found to be corrected and in compliance with HUD Guidelines and State of Maine Department of Environmental Protection criteria for clearance. A post hazard control work visual inspection and dust wipe samples were taken and found to be below these clearance criteria.

HUD Guidelines and State of Maine DEP Lead Management Rules do not require full abatement of leadcontaining components within a dwelling. In many instances, interim controls will be used to mitigate lead paint hazards. This means that lead-based paint remains in your home and you should bear this in mind if you decide to perform any additional rehab to your home. Those components/surfaces/areas specified in the Design Plan will be corrected under MaineHousing's Lead Hazard Reduction Grant Program (Federal Lead) and/or Maine Lead-Paint Hazard Abatement Program (State Lead). A report detailing the sample results in conjunction with this Letter of Compliance are evidence that the work has been completed.

Sincerely,

Lead Designer Signature

Date

Lead Designer Name

Lead DesignerInspector License #

DISCLAIMER: THIS LETTER OF LEAD HAZARD CONTROL COMPLIANCE DOCUMENTS THAT THE LEAD HAZARD CONTROL WORK OUTLINED IN THE CONSTRUCTION CONTRACT AS WELL AS CLEARANCE SAMPLING HAVE BEEN PERFORMED, MEETING CLEARANCE LEVELS ESTABLISHED IN THE HUD GUIDELINES.

THIS LETTER **DOES NOT CONSTITUTE A LEAD-SAFE STATUS CERTIFICATE** AS DEFINED IN THE MAINE DEP LEAD MANAGEMENT REGULATIONS.

CERTIFICATE OF FINAL INSPECTION

Project Funding:	State Lead	Federal Lead	Healthy Homes	DHHS	Project Type:	□ Single-Family	Multi-Family		
Agency (CAA):				CAA Rep	CAA Rep Name:				
				CAA Rep Title: CAA Rep Phone:					
				CAA Rep	Email:				
Applicant (Owne	r):		Co	-Applicant:					
Property:			Co	ontractor:					
			Co	ontract Amo	ount: \$				
			Co	ontract Date	:				

- 1. The CAA Technician certifies and the Applicant(s)/Owner(s) acknowledges that the Contractor has satisfactorily completed the lead-hazard work, including all change orders, as outlined in the *Construction Contract* ("Contract") for the herein referenced Property, and final cleaning that passed HUD lead dust wipe clearance standards as outlined in the Contract between the Applicant(s) and the Contractor on the above written Contract Date.
- 2. The Applicant(s)/Owner(s) acknowledges that he/she received a Client Satisfaction Survey card which provides an opportunity to provide MaineHousing with information about his/her experience with the Home Accessibility and Repair Program Assistance Program.

Lead Designer Signature	Date
Lead Designer Name	
Acknowledged by:	
Applicant Signature	Date
Co-Applicant Signature	Date

LEAD HAZARD REDUCTION GRANT PROGRAM (Federal Lead) HUD SECTION 3 VERIFICATION DATA

Contractor Name	:
Contractor Addre	ess:

The requirements of HUD Section 3 apply to recipients of HUD Lead-Based Paint Hazard Control funding exceeding \$200,000 in one year. Contractors or subcontractors that receive contracts in excess of \$100,000 for Section 3 covered projects and/or activities are required to comply with Section 3 regulations in the same manner as direct recipients (visit https://www.hud.gov/Section3 for additional information about Section 3 regulations).

INSTRUCTIONS: Contractors must complete and submit this HUD Section 3 Verification Data Form for each project (Property). In addition, contractors must complete the Contractor Pollution Occurrence Insurance Incentive Pilot Program (CPOII Pilot Program) section of this form in order to participate in the CPOII Pilot Program.

1. Is your business a qualified Section 3 business?

If Yes, Please indicate one of the following:

- $\hfill\square$ Business is 51 percent or more owned by Section 3 residents.
- □ Business's permanent, full-time employees include persons, at least 30 percent of whom are Section 3 residents, (or within three years of first employment with the firm were Section 3 residents.)
- □ Business can provide evidence of a commitment to subcontract in excess of 25 percent of the dollar amount of all subcontracts to be awarded to businesses that meet the qualifications described above.

Definition of Section 3 Residents: (1) Residents of Public and Indian Housing; or **(2)** Individuals that reside in the area in which the Section 3 covered assistance is expended <u>whose incomes do not exceed the local criteria of low-income</u>. Refer to the 2020 80% Median Income Limits by Family Size.

2. HUD Section 3 regulations intend that recipients of HUD funding hire Section 3 residents or award contracts to Section 3 businesses whenever possible to complete covered projects/activities. If the expenditure-covered funding does not result in new employment, contracting or training opportunities, the requirements have not been triggered.

Contract Date:

Contract Amount: \$

3. Did your business hire additional help, even temporary, to work on the project?

Complete the following table in reference to the above project only. (Other qualified projects for this grant will report separately.)

А.	В.	C.	D.	E.	F.
Job Category	Number of New Hires	Number of New Hires that are Sec 3 Residents	% of Aggregate Number of Staff Hours or New Hires that are Sec 3 Residents	% of Total Staff Hours for Sec 3 Employees and Trainees	Number of Sec 3 Trainees
Professionals					
Technicians					
Office/Clerical					
Lead Abatement					
Carpenter RRP					
Electrician					
Other (describe)					

Column A: Contains various job categories. Professionals are defined as people who have special knowledge of an occupation (i.e., supervisors, architects, surveyors, planners and computer programmers).

Column B: Enter the total number of new hires for each category of workers identified in Column A in connection with the project. New hires refer to persons not on the contractor's payroll for employment prior to the commencement of the project identified on this Section 3 Report.

Column C: Enter the number of Section 3 new hires for each category of workers identified in Column A in connection with the project. New hires refer to persons not on the contractor's payroll for employment prior to the commencement of the project identified on this Section 3 Report.

Column D: Enter the percentage of the total staff hours of new hires in connection with this project.

Column E: Enter the percentage of the total staff hours worked for employees and trainees (including new hires) connected with this project. Include staff hours for part-time and full-time.

Column F: Enter the number of Section 3 residents that were trained in connection with this project.

Contractor Pollution Occurrence Insurance Incentive Pilot Program

INSTRUCTIONS: Contractors must complete this Contractor Pollution Occurrence Insurance Incentive Pilot Program (CPOII Pilot Program) section to receive a \$500 incentive payment to supplement Pollution Occurrence insurance premiums currently being paid by the Contractor who performed lead hazard reduction and/or abatement services funded through HUD's Lead Hazard Reduction Grant. The maximum annual award is \$2,000 per contractor. MaineHousing will calculate and remit payment directly to Contractors. Contractors who have reached the maximum benefit amount of \$2,000 during the current calendar year of the pilot program will not be eligible for an incentive payment until January 1 of the following calendar year. The CPOII Pilot Program period is February 3, 2020 through August 3, 2023.

□ I wish to participate in the CPOII Pilot Program. I certify the following (check all that apply):

- □ Project started within seven (7) days from the effective start date indicated on the signed Construction Contract
- □ Project completed by the end date referenced on the signed Construction Contract
- $\hfill\square$ Units cleared on the first test.
- □ I have satisfactorily completed the necessary work to justify this request.
- □ Attached is my company's current and active Pollution Occurrence Insurance Certificate.

□ I do not wish to participate in the CPOII Pilot Program.

Contractor Representative Signature

Date

Contractor Representative Name

U	Ν	IT	#
υ	IN		#

LEAD PAINT PLUS ESSENTIAL MAINTENANCE PLAN

Project Funding: Agency (CAA):	State Lead	Federal Lead	Healthy Homes	DHHS CAA Rep Nar CAA Rep Title CAA Rep Pho CAA Rep Ema	ne:	☐ Single-Family	☐ Multi-Family
Applicant (Owne	r):		Co	o-Applicant:			
Property:			Co	ontractor:			
Unit #:			Ins	spection Dat	e:		

RESIDENTIAL UNIT:

A. <u>Overview</u>

Paint Plus Essential Maintenance Plan ("Paint Plus") is an interim (short-term) method used by lead contractors and property owners to temporarily eliminate lead hazards. Interim controls are achieved through the removal of any chipping, cracking, and flaking paint plus the application of a new protective coating of paint in conjunction with the implementation of a written essential maintenance plan. This method cannot be used on impact or friction surfaces (e.g. floors, stair treads/risers, thresh holds, window sashes, parting beads, stops, window wells, doorjambs and edges).

B. Essential Maintenance Plan

An Essential Maintenance Plan is a written and implemented plan of paint inspection and maintenance that ensures that the paint remains in good condition and that the surface is not creating a lead hazard. The building owner must carry out Essential Maintenance Practices six months from the initial application of the paint and annually thereafter, whenever occupancy changes and immediately after the occurrence of unexpected events which cause deterioration of the painted surfaces.

Enclosed you will find an inventory of the building components that you will need to inspect and several forms that will assist you in documenting your Essential Maintenance Plan-related activities. Also enclosed you will find the "Essential Maintenance for a Lead-Safe Home" brochure. Please make sure you read this brochure; it provides information you need to implement Essential Maintenance Practices.

C. <u>Elements of the Essential Maintenance Plan</u>

The Essential Maintenance Plan has 4 parts: an inventory of painted surfaces that need routine inspection and maintenance; a schedule and protocol for routine visual inspections; forms for documenting routine inspections and essential maintenance performed; and the booklet "Essential Maintenance for a Lead-Safe Home" that describes how to perform essential maintenance.

D. <u>"Paint Plus" Building Component Inventory</u>

The *"Paint Plus" Building Component Inventory Form* contains a list of all building components within your dwelling unit where paint plus essential maintenance practices was used by the contractor. It is organized first by <u>Room Name</u>, and then lists <u>Building Component</u> and <u>Location in the Room</u>. These are the specific building components that must be visually inspected and properly maintained.

E. <u>Scheduled Visual Inspections of Building Components</u>

Each of the building components listed on the *"Paint Plus" Building Component Inventory Form* must be visually inspected six months from the initial application of the paint and annually thereafter, whenever occupancy changes and immediately after the occurrence of unexpected events which cause deterioration of the painted surfaces. You must do this visual inspection to document that the condition of the paint remains intact.

F. How to do a visual inspection

When performing your inspection, check each building component for signs of:

- (1) Flaking paint
- (2) Peeling paint
- (3) Cracking paint
- (4) Paint chips
- (5) Dust on window sills
- (6) Dust on the floor

If the building component is damaged and/or needs repair, follow the **Safe Work Practices** referred to in the enclosed brochure, "<u>Essential Maintenance for a Lead-Safe Home</u>".

G. What to do after your visual inspection

After completing the routine visual inspection, fill in the enclosed form, "**Visual Inspection Form**" to document that you have done your visual inspection(s). Save this form with your Essential Maintenance Practices Plan.

H. Documenting Essential Maintenance Practices Plan Requirements

Included are forms used to record your Essential Maintenance Practice-related activities. It includes a signature sheet that is to be used to document that you have read and understand the Essential Maintenance Practices Plan requirements.

I. Forms/Signature Sheet

- (1) Understanding the Requirements of the Essential Maintenance Practices Plan Signature Sheet;
- (2) Paint Plus Building Component Inventory Form;
- (3) Visual Inspection Form; and
- (4) Essential Maintenance for a Lead-Safe Home brochure.

Understanding the Requirements of the Essential Maintenance Practices Plan

I/We have read and understand the requirements of the Essential Maintenance Practices Plan, and agree to maintain this facility in accordance with the developed Essential Maintenance Practices Plan.

:

Applicant Signature

Co-Applicant Signature

Date

Date

UNIT # _____

BUILDING COMPONENT INVENTORY FORM

The following listing shows the type and location of those building components where Paint Plus Essential Maintenance Practices was used as a lead hazard control method by a lead abatement contractor to eliminate lead hazards. These are the specific building components that must be visually inspected and properly maintained to prevent lead hazards from redeveloping.

RESIDENTIAL UNIT:

Room Name	Building Component	Location in Room

VISUAL INSPECTION FORM AND ESSENTIAL MAINTENANCE RECORD

This form is used to document your visual inspections and essential maintenance actions conducted six months from the initial application of the paint and annually thereafter, whenever occupancy changes and immediately after the occurrence of unexpected events which cause deterioration of the painted surfaces. This helps ensure that the paint on these building components remains in good condition and that the surfaces are not creating lead hazards.

RESIDENTIAL UNIT:

Room Name	Building Component	Location in Room	Changed Noted	Maintenance Needed	Date Maintenance Completed

INSPECTION DATE

MAINE LEAD PAINT HAZARD ABATEMENT PROGRAM (State Lead) LEAD HAZARD REDUCTION GRANT PROGRAM (Federal Lead)

QUARTERLY REPORT: SUPPLEMENTAL INFORMATION For individual, completed units

Project Funding:	State Lead	Federal Lead	Healthy Homes	DHHS CAA Rep	Nomo:	□ Single-Family	☐ Multi-Family
				CAA Rep			
				CAA Rep CAA Rep	Emaile		
				CAA Rep			
Applicant (Owner):			Co-A	pplicant:			
Property:			Tena	int:			
			Unit	#:			
Apartment/Unit #:					Are chi	ldren covered by	
Total # of rooms in	n unit:				ר _	/es	Νο
# of children with	EBLL:				_		
Key Dates:							
Enrollment date			V	/ork starte	d date		
Assessed date			C	learance a	achieved date	e	
# of rooms treated	in unit:						
Areas Abated (che	ck all that	apply):					
□ Interior				Baser	ment		
Exterior				Grour	nd floor		
	rea			□ Uppe	r level(s)		
Crawl space	9			□ Attic			
Relocation Total:		\$					
Abatement Total:	_	\$		_			

U	Ν	IT	#
υ	IN		#

LEAD PAINT PLUS ESSENTIAL MAINTENANCE PLAN

Project Funding: Agency (CAA):	State Lead	Federal Lead	Healthy Homes	5 DHHS CAA Rej CAA Rej CAA Rej CAA Rej	p Title:	☐ Single-Family	Multi-Family
Applicant (Owne	Applicant (Owner): Co-Applicant:						
Property:		Contractor:					
Unit #:			In	Inspection Date:			

RESIDENTIAL UNIT:

A. <u>Overview</u>

Paint Plus Essential Maintenance Plan ("Paint Plus") is an interim (short-term) method used by lead contractors and property owners to temporarily eliminate lead hazards. Interim controls are achieved through the removal of any chipping, cracking, and flaking paint plus the application of a new protective coating of paint in conjunction with the implementation of a written essential maintenance plan. This method cannot be used on impact or friction surfaces (e.g. floors, stair treads/risers, thresh holds, window sashes, parting beads, stops, window wells, doorjambs and edges).

B. Essential Maintenance Plan

An Essential Maintenance Plan is a written and implemented plan of paint inspection and maintenance that ensures that the paint remains in good condition and that the surface is not creating a lead hazard. The building owner must carry out Essential Maintenance Practices six months from the initial application of the paint and annually thereafter, whenever occupancy changes and immediately after the occurrence of unexpected events which cause deterioration of the painted surfaces.

Enclosed you will find an inventory of the building components that you will need to inspect and several forms that will assist you in documenting your Essential Maintenance Plan-related activities. Also enclosed you will find the "Essential Maintenance for a Lead-Safe Home" brochure. Please make sure you read this brochure; it provides information you need to implement Essential Maintenance Practices.

C. <u>Elements of the Essential Maintenance Plan</u>

The Essential Maintenance Plan has 4 parts: an inventory of painted surfaces that need routine inspection and maintenance; a schedule and protocol for routine visual inspections; forms for documenting routine inspections and essential maintenance performed; and the booklet "Essential Maintenance for a Lead-Safe Home" that describes how to perform essential maintenance.

D. <u>"Paint Plus" Building Component Inventory</u>

The *"Paint Plus" Building Component Inventory Form* contains a list of all building components within your dwelling unit where paint plus essential maintenance practices was used by the contractor. It is organized first by <u>Room Name</u>, and then lists <u>Building Component</u> and <u>Location in the Room</u>. These are the specific building components that must be visually inspected and properly maintained.

E. <u>Scheduled Visual Inspections of Building Components</u>

Each of the building components listed on the *"Paint Plus" Building Component Inventory Form* must be visually inspected six months from the initial application of the paint and annually thereafter, whenever occupancy changes and immediately after the occurrence of unexpected events which cause deterioration of the painted surfaces. You must do this visual inspection to document that the condition of the paint remains intact.

F. How to do a visual inspection

When performing your inspection, check each building component for signs of:

- (1) Flaking paint
- (2) Peeling paint
- (3) Cracking paint
- (4) Paint chips
- (5) Dust on window sills
- (6) Dust on the floor

If the building component is damaged and/or needs repair, follow the **Safe Work Practices** referred to in the enclosed brochure, "<u>Essential Maintenance for a Lead-Safe Home</u>".

G. What to do after your visual inspection

After completing the routine visual inspection, fill in the enclosed form, "**Visual Inspection Form**" to document that you have done your visual inspection(s). Save this form with your Essential Maintenance Practices Plan.

H. Documenting Essential Maintenance Practices Plan Requirements

Included are forms used to record your Essential Maintenance Practice-related activities. It includes a signature sheet that is to be used to document that you have read and understand the Essential Maintenance Practices Plan requirements.

I. Forms/Signature Sheet

- (1) Understanding the Requirements of the Essential Maintenance Practices Plan Signature Sheet;
- (2) Paint Plus Building Component Inventory Form;
- (3) Visual Inspection Form; and
- (4) Essential Maintenance for a Lead-Safe Home brochure.

Understanding the Requirements of the Essential Maintenance Practices Plan

I/We have read and understand the requirements of the Essential Maintenance Practices Plan, and agree to maintain this facility in accordance with the developed Essential Maintenance Practices Plan.

:

Applicant Signature

Co-Applicant Signature

Date

Date

UNIT # _____

BUILDING COMPONENT INVENTORY FORM

The following listing shows the type and location of those building components where Paint Plus Essential Maintenance Practices was used as a lead hazard control method by a lead abatement contractor to eliminate lead hazards. These are the specific building components that must be visually inspected and properly maintained to prevent lead hazards from redeveloping.

RESIDENTIAL UNIT:

Room Name	Building Component	Location in Room

VISUAL INSPECTION FORM AND ESSENTIAL MAINTENANCE RECORD

This form is used to document your visual inspections and essential maintenance actions conducted six months from the initial application of the paint and annually thereafter, whenever occupancy changes and immediately after the occurrence of unexpected events which cause deterioration of the painted surfaces. This helps ensure that the paint on these building components remains in good condition and that the surfaces are not creating lead hazards.

RESIDENTIAL UNIT:

Room Name	Building Component	Location in Room	Changed Noted	Maintenance Needed	Date Maintenance Completed

INSPECTION DATE

MAINE LEAD PAINT HAZARD ABATEMENT PROGRAM (State Lead) LEAD HAZARD REDUCTION GRANT PROGRAM (Federal Lead)

QUARTERLY REPORT: SUPPLEMENTAL INFORMATION For individual, completed units

Project Funding: Agency (CAA):	State Lead	☐ Federal Lead	Healthy Home		p Name:	Single-Family	
				CAA Re	p Phone:		
				CAA Re	n Emoil:		
Applicant (Owner):				Co-Applicant:			
Property:				Tenant: Unit #:			
Apartment/Unit #:					Are child	ren covered by I	
Total # of rooms in	n unit:					Yes	Νο
# of children with	EBLL:						
Key Dates:							
Enrollment date				Work starte	ed date		
Assessed date				Clearance	achieved date		
# of rooms treated	in unit:						
Areas Abated (che	ck all that	apply):					
□ Interior				Base	ment		
□ Exterior				Grou	nd floor		
Common A	rea			🛛 Uppe	er level(s)		
Crawl space	9			□ Attic			
Relocation Total:		\$					
Abatement Total:		\$					

U	Ν	IT	#
υ	IN		#

LEAD PAINT PLUS ESSENTIAL MAINTENANCE PLAN

Project Funding: Agency (CAA):	State Lead	Federal Lead	Healthy Hom	CAA Re CAA Re	p Name: p Title: p Phone:	Single-Family	Multi-Family
Applicant (Owne	Owner): Co-Applicant:				·		
Property:				Contractor:			
Unit #:			I	Inspection Date:			

RESIDENTIAL UNIT:

A. <u>Overview</u>

Paint Plus Essential Maintenance Plan ("Paint Plus") is an interim (short-term) method used by lead contractors and property owners to temporarily eliminate lead hazards. Interim controls are achieved through the removal of any chipping, cracking, and flaking paint plus the application of a new protective coating of paint in conjunction with the implementation of a written essential maintenance plan. This method cannot be used on impact or friction surfaces (e.g. floors, stair treads/risers, thresh holds, window sashes, parting beads, stops, window wells, doorjambs and edges).

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An Essential Maintenance Plan is a written and implemented plan of paint inspection and maintenance that ensures that the paint remains in good condition and that the surface is not creating a lead hazard. The building owner must carry out Essential Maintenance Practices six months from the initial application of the paint and annually thereafter, whenever occupancy changes and immediately after the occurrence of unexpected events which cause deterioration of the painted surfaces.

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C. <u>Elements of the Essential Maintenance Plan</u>

The Essential Maintenance Plan has 4 parts: an inventory of painted surfaces that need routine inspection and maintenance; a schedule and protocol for routine visual inspections; forms for documenting routine inspections and essential maintenance performed; and the booklet "Essential Maintenance for a Lead-Safe Home" that describes how to perform essential maintenance.

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The *"Paint Plus" Building Component Inventory Form* contains a list of all building components within your dwelling unit where paint plus essential maintenance practices was used by the contractor. It is organized first by <u>Room Name</u>, and then lists <u>Building Component</u> and <u>Location in the Room</u>. These are the specific building components that must be visually inspected and properly maintained.

E. Scheduled Visual Inspections of Building Components

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F. How to do a visual inspection

When performing your inspection, check each building component for signs of:

- (1) Flaking paint
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- (5) Dust on window sills
- (6) Dust on the floor

If the building component is damaged and/or needs repair, follow the **Safe Work Practices** referred to in the enclosed brochure, "<u>Essential Maintenance for a Lead-Safe Home</u>".

G. What to do after your visual inspection

After completing the routine visual inspection, fill in the enclosed form, "**Visual Inspection Form**" to document that you have done your visual inspection(s). Save this form with your Essential Maintenance Practices Plan.

H. Documenting Essential Maintenance Practices Plan Requirements

Included are forms used to record your Essential Maintenance Practice-related activities. It includes a signature sheet that is to be used to document that you have read and understand the Essential Maintenance Practices Plan requirements.

I. Forms/Signature Sheet

- (1) Understanding the Requirements of the Essential Maintenance Practices Plan Signature Sheet;
- (2) Paint Plus Building Component Inventory Form;
- (3) Visual Inspection Form; and
- (4) Essential Maintenance for a Lead-Safe Home brochure.

Understanding the Requirements of the Essential Maintenance Practices Plan

I/We have read and understand the requirements of the Essential Maintenance Practices Plan, and agree to maintain this facility in accordance with the developed Essential Maintenance Practices Plan.

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Applicant Signature

Co-Applicant Signature

Date

Date

UNIT # _____

BUILDING COMPONENT INVENTORY FORM

The following listing shows the type and location of those building components where Paint Plus Essential Maintenance Practices was used as a lead hazard control method by a lead abatement contractor to eliminate lead hazards. These are the specific building components that must be visually inspected and properly maintained to prevent lead hazards from redeveloping.

RESIDENTIAL UNIT:

Room Name	Building Component	Location in Room

VISUAL INSPECTION FORM AND ESSENTIAL MAINTENANCE RECORD

This form is used to document your visual inspections and essential maintenance actions conducted six months from the initial application of the paint and annually thereafter, whenever occupancy changes and immediately after the occurrence of unexpected events which cause deterioration of the painted surfaces. This helps ensure that the paint on these building components remains in good condition and that the surfaces are not creating lead hazards.

RESIDENTIAL UNIT:

Room Name	Building Component	Location in Room	Changed Noted	Maintenance Needed	Date Maintenance Completed

INSPECTION DATE

MAINE LEAD PAINT HAZARD ABATEMENT PROGRAM (State Lead) LEAD HAZARD REDUCTION GRANT PROGRAM (Federal Lead)

QUARTERLY REPORT: SUPPLEMENTAL INFORMATION For individual, completed units

Project Funding:	State Lead	☐ Federal Lead	Healthy Home	es DHHS CAA Rep CAA Rep	Name:	Single-Family	☐ Multi-Family
				CAA Rep CAA Rep	Email:		
Applicant (Owner):				Co-Applicant:			
Property:				Гenant: Jnit #:			
Apartment/Unit #:					Are chi	dren covered by	MaineCare?
Total # of rooms in					_	Yes	No
# of children with I	EBLL:				_		
Key Dates:							
Enrollment date				Work starte	ed date		
Assessed date				Clearance	achieved dat	9	
# of rooms treated	in unit:						
Areas Abated (che	ck all that	t apply):					
□ Interior				□ Base	ment		
□ Exterior				Groui Groui	nd floor		
Common Ar	ea			🛛 Uppe	r level(s)		
Crawl space	9			☐ Attic			
Relocation Total:		\$					
Abatement Total:		\$					

U	Ν	IT	#
υ	IN		#

LEAD PAINT PLUS ESSENTIAL MAINTENANCE PLAN

Project Funding: Agency (CAA):	State Lead	Federal Lead	Healthy Homes	DHHS CAA Re CAA Re CAA Re CAA Re	p Title:	Single-Family	Multi-Family
Applicant (Owne	vner): Co-Applicant:						
Property:			Contractor:				
Unit #:			Ins	Inspection Date:			

RESIDENTIAL UNIT:

A. <u>Overview</u>

Paint Plus Essential Maintenance Plan ("Paint Plus") is an interim (short-term) method used by lead contractors and property owners to temporarily eliminate lead hazards. Interim controls are achieved through the removal of any chipping, cracking, and flaking paint plus the application of a new protective coating of paint in conjunction with the implementation of a written essential maintenance plan. This method cannot be used on impact or friction surfaces (e.g. floors, stair treads/risers, thresh holds, window sashes, parting beads, stops, window wells, doorjambs and edges).

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C. <u>Elements of the Essential Maintenance Plan</u>

The Essential Maintenance Plan has 4 parts: an inventory of painted surfaces that need routine inspection and maintenance; a schedule and protocol for routine visual inspections; forms for documenting routine inspections and essential maintenance performed; and the booklet "Essential Maintenance for a Lead-Safe Home" that describes how to perform essential maintenance.

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F. How to do a visual inspection

When performing your inspection, check each building component for signs of:

- (1) Flaking paint
- (2) Peeling paint
- (3) Cracking paint
- (4) Paint chips
- (5) Dust on window sills
- (6) Dust on the floor

If the building component is damaged and/or needs repair, follow the **Safe Work Practices** referred to in the enclosed brochure, "<u>Essential Maintenance for a Lead-Safe Home</u>".

G. What to do after your visual inspection

After completing the routine visual inspection, fill in the enclosed form, "**Visual Inspection Form**" to document that you have done your visual inspection(s). Save this form with your Essential Maintenance Practices Plan.

H. Documenting Essential Maintenance Practices Plan Requirements

Included are forms used to record your Essential Maintenance Practice-related activities. It includes a signature sheet that is to be used to document that you have read and understand the Essential Maintenance Practices Plan requirements.

I. Forms/Signature Sheet

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- (2) Paint Plus Building Component Inventory Form;
- (3) Visual Inspection Form; and
- (4) Essential Maintenance for a Lead-Safe Home brochure.

Understanding the Requirements of the Essential Maintenance Practices Plan

I/We have read and understand the requirements of the Essential Maintenance Practices Plan, and agree to maintain this facility in accordance with the developed Essential Maintenance Practices Plan.

:

Applicant Signature

Co-Applicant Signature

Date

Date

UNIT # _____

BUILDING COMPONENT INVENTORY FORM

The following listing shows the type and location of those building components where Paint Plus Essential Maintenance Practices was used as a lead hazard control method by a lead abatement contractor to eliminate lead hazards. These are the specific building components that must be visually inspected and properly maintained to prevent lead hazards from redeveloping.

RESIDENTIAL UNIT:

Room Name	Building Component	Location in Room

VISUAL INSPECTION FORM AND ESSENTIAL MAINTENANCE RECORD

This form is used to document your visual inspections and essential maintenance actions conducted six months from the initial application of the paint and annually thereafter, whenever occupancy changes and immediately after the occurrence of unexpected events which cause deterioration of the painted surfaces. This helps ensure that the paint on these building components remains in good condition and that the surfaces are not creating lead hazards.

RESIDENTIAL UNIT:

Room Name	Building Component	Location in Room	Changed Noted	Maintenance Needed	Date Maintenance Completed

INSPECTION DATE

MAINE LEAD PAINT HAZARD ABATEMENT PROGRAM (State Lead) LEAD HAZARD REDUCTION GRANT PROGRAM (Federal Lead)

QUARTERLY REPORT: SUPPLEMENTAL INFORMATION For individual, completed units

Project Funding: Agency (CAA):	State Lead	Federal Lead	Healthy Homes	DHHS CAA Rep Nar	Project Type: 🛛 S		☐ Multi-Family
				CAA Rep Titl			
				CAA Rep Pho			
				CAA Rep Em	ail:		
Applicant (Owner):			Co	-Applicant:			
Property:		Tenant:					
			Un	it #:			
Apartment/Unit #:					Are children	covered by	
Total # of rooms in	n unit:				Yes		No
# of children with	EBLL:						
[
Key Dates:							
Enrollment date				Work started	l date		
Assessed date				Clearance achieved date			
# of rooms treated	l in unit:						
Areas Abated (che	eck all tha	t apply):					
□ Interior				Basem			
□ Exterior				Ground	d floor		
Common A	rea			Upper	level(s)		
Crawl space	9			□ Attic			
Relocation Total:		\$					
Abatement Total:	_	\$					

U	Ν	IT	#
υ	IN		#

LEAD PAINT PLUS ESSENTIAL MAINTENANCE PLAN

Project Funding: Agency (CAA):	State Lead	Federal Lead	Healthy Homes	DHHS CAA Rep Nar CAA Rep Titl CAA Rep Pho CAA Rep Em	ne:	☐ Single-Family	☐ Multi-Family
Applicant (Owne	r):		Co	o-Applicant:			
Property:			Co	ontractor:			
Unit #:			In:	spection Dat	e:		

RESIDENTIAL UNIT:

A. <u>Overview</u>

Paint Plus Essential Maintenance Plan ("Paint Plus") is an interim (short-term) method used by lead contractors and property owners to temporarily eliminate lead hazards. Interim controls are achieved through the removal of any chipping, cracking, and flaking paint plus the application of a new protective coating of paint in conjunction with the implementation of a written essential maintenance plan. This method cannot be used on impact or friction surfaces (e.g. floors, stair treads/risers, thresh holds, window sashes, parting beads, stops, window wells, doorjambs and edges).

B. Essential Maintenance Plan

An Essential Maintenance Plan is a written and implemented plan of paint inspection and maintenance that ensures that the paint remains in good condition and that the surface is not creating a lead hazard. The building owner must carry out Essential Maintenance Practices six months from the initial application of the paint and annually thereafter, whenever occupancy changes and immediately after the occurrence of unexpected events which cause deterioration of the painted surfaces.

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C. <u>Elements of the Essential Maintenance Plan</u>

The Essential Maintenance Plan has 4 parts: an inventory of painted surfaces that need routine inspection and maintenance; a schedule and protocol for routine visual inspections; forms for documenting routine inspections and essential maintenance performed; and the booklet "Essential Maintenance for a Lead-Safe Home" that describes how to perform essential maintenance.

D. <u>"Paint Plus" Building Component Inventory</u>

The *"Paint Plus" Building Component Inventory Form* contains a list of all building components within your dwelling unit where paint plus essential maintenance practices was used by the contractor. It is organized first by <u>Room Name</u>, and then lists <u>Building Component</u> and <u>Location in the Room</u>. These are the specific building components that must be visually inspected and properly maintained.

E. <u>Scheduled Visual Inspections of Building Components</u>

Each of the building components listed on the *"Paint Plus" Building Component Inventory Form* must be visually inspected six months from the initial application of the paint and annually thereafter, whenever occupancy changes and immediately after the occurrence of unexpected events which cause deterioration of the painted surfaces. You must do this visual inspection to document that the condition of the paint remains intact.

F. How to do a visual inspection

When performing your inspection, check each building component for signs of:

- (1) Flaking paint
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If the building component is damaged and/or needs repair, follow the **Safe Work Practices** referred to in the enclosed brochure, "<u>Essential Maintenance for a Lead-Safe Home</u>".

G. What to do after your visual inspection

After completing the routine visual inspection, fill in the enclosed form, "**Visual Inspection Form**" to document that you have done your visual inspection(s). Save this form with your Essential Maintenance Practices Plan.

H. Documenting Essential Maintenance Practices Plan Requirements

Included are forms used to record your Essential Maintenance Practice-related activities. It includes a signature sheet that is to be used to document that you have read and understand the Essential Maintenance Practices Plan requirements.

I. Forms/Signature Sheet

- (1) Understanding the Requirements of the Essential Maintenance Practices Plan Signature Sheet;
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Understanding the Requirements of the Essential Maintenance Practices Plan

I/We have read and understand the requirements of the Essential Maintenance Practices Plan, and agree to maintain this facility in accordance with the developed Essential Maintenance Practices Plan.

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Applicant Signature

Co-Applicant Signature

Date

Date

UNIT # _____

BUILDING COMPONENT INVENTORY FORM

The following listing shows the type and location of those building components where Paint Plus Essential Maintenance Practices was used as a lead hazard control method by a lead abatement contractor to eliminate lead hazards. These are the specific building components that must be visually inspected and properly maintained to prevent lead hazards from redeveloping.

RESIDENTIAL UNIT:

Room Name	Building Component	Location in Room

VISUAL INSPECTION FORM AND ESSENTIAL MAINTENANCE RECORD

This form is used to document your visual inspections and essential maintenance actions conducted six months from the initial application of the paint and annually thereafter, whenever occupancy changes and immediately after the occurrence of unexpected events which cause deterioration of the painted surfaces. This helps ensure that the paint on these building components remains in good condition and that the surfaces are not creating lead hazards.

RESIDENTIAL UNIT:

Room Name	Building Component	Location in Room	Changed Noted	Maintenance Needed	Date Maintenance Completed

INSPECTION DATE

Project Funding:	State Lead	☐ Federal Lead	Healthy Homes		p Name:	e: □ Single-Fa	amily 🛛 Multi-Family
				CAA Re	n Phono:		
					n Emoil:		
Annlinent (Oumer):			0-	Annlinente			
Applicant (Owner):			Co	-Applicant:			
Property:				nant: it #:			
Apartment/Unit #					Are chi	Idren covered	by MaineCare?
Total # of rooms in						Yes	No
# of children with					_		
					_		
Key Dates:							
Enrollment date				Work starte	ed date		
Assessed date				Clearance	achieved d	ate	
# of rooms treated	l in unit:						
Areas Abated (che	eck all that	apply):					
□ Interior				Base	ment		
□ Exterior				Grou	nd floor		
Common A	rea			🗆 Uppe	r level(s)		
Crawl space	e			□ Attic			
Relocation Total:		\$					
Abatement Total:	_	\$					

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LEAD HAZARD REDUCTION GRANT PROGRAM (Federal Lead) MAINE LEAD PAINT HAZARD ABATEMENT PROGRAM (State Lead)

LEAD PAINT PLUS ESSENTIAL MAINTENANCE PLAN

Project Funding: Agency (CAA):	State Lead	Federal Lead	Healthy Homes	CAA R CAA R CAA R	Project Type: lep Name: lep Title: lep Phone: lep Email:	Single-Family	Multi-Family
Applicant (Owne	r):		Co	o-Applicant:			
Property:			Co	Contractor:			
Unit #:			In:	spection Da	te:		

RESIDENTIAL UNIT:

A. <u>Overview</u>

Paint Plus Essential Maintenance Plan ("Paint Plus") is an interim (short-term) method used by lead contractors and property owners to temporarily eliminate lead hazards. Interim controls are achieved through the removal of any chipping, cracking, and flaking paint plus the application of a new protective coating of paint in conjunction with the implementation of a written essential maintenance plan. This method cannot be used on impact or friction surfaces (e.g. floors, stair treads/risers, thresh holds, window sashes, parting beads, stops, window wells, doorjambs and edges).

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G. What to do after your visual inspection

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I. Forms/Signature Sheet

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Understanding the Requirements of the Essential Maintenance Practices Plan

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Applicant Signature

Co-Applicant Signature

Date

Date

UNIT # _____

BUILDING COMPONENT INVENTORY FORM

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RESIDENTIAL UNIT:

Room Name	Building Component	Location in Room

VISUAL INSPECTION FORM AND ESSENTIAL MAINTENANCE RECORD

This form is used to document your visual inspections and essential maintenance actions conducted six months from the initial application of the paint and annually thereafter, whenever occupancy changes and immediately after the occurrence of unexpected events which cause deterioration of the painted surfaces. This helps ensure that the paint on these building components remains in good condition and that the surfaces are not creating lead hazards.

RESIDENTIAL UNIT:

Room Name	Building Component	Location in Room	Changed Noted	Maintenance Needed	Date Maintenance Completed

INSPECTION DATE

Project Funding:	State Lead	Federal Lead	Healthy Homes	CAA Re	p Name:	□ Single-Family	☐ Multi-Family
				CAA Re			
				CAA Re			
				CAA Re	p Email:		
Applicant (Owner):			Co	o-Applicant:			
Property:			Te	enant:			
			Ui	nit #:			
Apartment/Unit #:					Are child	dren covered by	MaineCare?
Total # of rooms in	unit:				_	Yes	No
# of children with E	BLL:						
Key Dates:							
Enrollment date				Work starte	ed date		
Assessed date			<u> </u>	Clearance	achieved date		
# of rooms treated	in unit:						
Areas Abated (che	ck all tha	t apply):					
□ Interior				Base	ment		
□ Exterior				🛛 Grou	nd floor		
Common Are	ea			🗆 Uppe	er level(s)		
Crawl space	!			☐ Attic			
Relocation Total:		\$					
Abatement Total:		\$					
		*					

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υ	IN		#

LEAD HAZARD REDUCTION GRANT PROGRAM (Federal Lead) MAINE LEAD PAINT HAZARD ABATEMENT PROGRAM (State Lead)

LEAD PAINT PLUS ESSENTIAL MAINTENANCE PLAN

Project Funding: Agency (CAA):	State Lead	Federal Lead	Healthy Hom	es	CAA Re	Project Type: ep Name: ep Title: ep Phone: ep Email:	Single-Family	Multi-Family
Applicant (Owne	r):			Co-App	licant:			
Property:				Contra	ctor:			
Unit #:			I	nspect	tion Da	te:		

RESIDENTIAL UNIT:

A. <u>Overview</u>

Paint Plus Essential Maintenance Plan ("Paint Plus") is an interim (short-term) method used by lead contractors and property owners to temporarily eliminate lead hazards. Interim controls are achieved through the removal of any chipping, cracking, and flaking paint plus the application of a new protective coating of paint in conjunction with the implementation of a written essential maintenance plan. This method cannot be used on impact or friction surfaces (e.g. floors, stair treads/risers, thresh holds, window sashes, parting beads, stops, window wells, doorjambs and edges).

B. Essential Maintenance Plan

An Essential Maintenance Plan is a written and implemented plan of paint inspection and maintenance that ensures that the paint remains in good condition and that the surface is not creating a lead hazard. The building owner must carry out Essential Maintenance Practices six months from the initial application of the paint and annually thereafter, whenever occupancy changes and immediately after the occurrence of unexpected events which cause deterioration of the painted surfaces.

Enclosed you will find an inventory of the building components that you will need to inspect and several forms that will assist you in documenting your Essential Maintenance Plan-related activities. Also enclosed you will find the "Essential Maintenance for a Lead-Safe Home" brochure. Please make sure you read this brochure; it provides information you need to implement Essential Maintenance Practices.

C. <u>Elements of the Essential Maintenance Plan</u>

The Essential Maintenance Plan has 4 parts: an inventory of painted surfaces that need routine inspection and maintenance; a schedule and protocol for routine visual inspections; forms for documenting routine inspections and essential maintenance performed; and the booklet "Essential Maintenance for a Lead-Safe Home" that describes how to perform essential maintenance.

D. <u>"Paint Plus" Building Component Inventory</u>

The *"Paint Plus" Building Component Inventory Form* contains a list of all building components within your dwelling unit where paint plus essential maintenance practices was used by the contractor. It is organized first by <u>Room Name</u>, and then lists <u>Building Component</u> and <u>Location in the Room</u>. These are the specific building components that must be visually inspected and properly maintained.

E. <u>Scheduled Visual Inspections of Building Components</u>

Each of the building components listed on the *"Paint Plus" Building Component Inventory Form* must be visually inspected six months from the initial application of the paint and annually thereafter, whenever occupancy changes and immediately after the occurrence of unexpected events which cause deterioration of the painted surfaces. You must do this visual inspection to document that the condition of the paint remains intact.

F. How to do a visual inspection

When performing your inspection, check each building component for signs of:

- (1) Flaking paint
- (2) Peeling paint
- (3) Cracking paint
- (4) Paint chips
- (5) Dust on window sills
- (6) Dust on the floor

If the building component is damaged and/or needs repair, follow the **Safe Work Practices** referred to in the enclosed brochure, "<u>Essential Maintenance for a Lead-Safe Home</u>".

G. What to do after your visual inspection

After completing the routine visual inspection, fill in the enclosed form, "**Visual Inspection Form**" to document that you have done your visual inspection(s). Save this form with your Essential Maintenance Practices Plan.

H. Documenting Essential Maintenance Practices Plan Requirements

Included are forms used to record your Essential Maintenance Practice-related activities. It includes a signature sheet that is to be used to document that you have read and understand the Essential Maintenance Practices Plan requirements.

I. Forms/Signature Sheet

- (1) Understanding the Requirements of the Essential Maintenance Practices Plan Signature Sheet;
- (2) Paint Plus Building Component Inventory Form;
- (3) Visual Inspection Form; and
- (4) Essential Maintenance for a Lead-Safe Home brochure.

Understanding the Requirements of the Essential Maintenance Practices Plan

I/We have read and understand the requirements of the Essential Maintenance Practices Plan, and agree to maintain this facility in accordance with the developed Essential Maintenance Practices Plan.

:

Applicant Signature

Co-Applicant Signature

Date

Date

UNIT # _____

BUILDING COMPONENT INVENTORY FORM

The following listing shows the type and location of those building components where Paint Plus Essential Maintenance Practices was used as a lead hazard control method by a lead abatement contractor to eliminate lead hazards. These are the specific building components that must be visually inspected and properly maintained to prevent lead hazards from redeveloping.

RESIDENTIAL UNIT:

Room Name	Building Component	Location in Room

VISUAL INSPECTION FORM AND ESSENTIAL MAINTENANCE RECORD

This form is used to document your visual inspections and essential maintenance actions conducted six months from the initial application of the paint and annually thereafter, whenever occupancy changes and immediately after the occurrence of unexpected events which cause deterioration of the painted surfaces. This helps ensure that the paint on these building components remains in good condition and that the surfaces are not creating lead hazards.

RESIDENTIAL UNIT:

Room Name	Building Component	Location in Room	Changed Noted	Maintenance Needed	Date Maintenance Completed

INSPECTION DATE

Project Funding:	State Lead	Federal Lead	Healthy Homes	CAA Rep Na CAA Rep Ti CAA Rep Pl	ame: itle: hone:	□ Single-Family	☐ Multi-Family
				CAA Rep Er	mail:		
Applicant (Owner):			Co-/	Applicant:			
Property:			Tena Unit				
Apartment/Unit #	:				Are Chile	dren covered by	MaineCare?
Total # of rooms i	n unit:					Yes	Νο
# of children with	EBLL:						
Key Dates:							
Enrollment date			V	Vork started	date		
Assessed date			(learance acl	hieved date		
# of rooms treated	d in unit:						
Areas Abated (ch	eck all that	t apply):					
□ Interior				🗆 Baseme	ent		
□ Exterior				Ground	floor		
Common A	rea			D Upper le	evel(s)		
Crawl spac	e			☐ Attic			
Relocation Total:		\$		_			
Abatement Total:	_	\$		_			

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LEAD HAZARD REDUCTION GRANT PROGRAM (Federal Lead) MAINE LEAD PAINT HAZARD ABATEMENT PROGRAM (State Lead)

LEAD PAINT PLUS ESSENTIAL MAINTENANCE PLAN

Project Funding: Agency (CAA):	State Lead	Federal Lead	Healthy Hor	nes - -	CAA Re CAA Re	p Name:	Single-Family	☐ Multi-Family
Applicant (Owne	r):			Co-Ap	plicant:			
Property:				Contractor:				
Unit #:				Inspec	tion Da	te:		

RESIDENTIAL UNIT:

A. <u>Overview</u>

Paint Plus Essential Maintenance Plan ("Paint Plus") is an interim (short-term) method used by lead contractors and property owners to temporarily eliminate lead hazards. Interim controls are achieved through the removal of any chipping, cracking, and flaking paint plus the application of a new protective coating of paint in conjunction with the implementation of a written essential maintenance plan. This method cannot be used on impact or friction surfaces (e.g. floors, stair treads/risers, thresh holds, window sashes, parting beads, stops, window wells, doorjambs and edges).

B. Essential Maintenance Plan

An Essential Maintenance Plan is a written and implemented plan of paint inspection and maintenance that ensures that the paint remains in good condition and that the surface is not creating a lead hazard. The building owner must carry out Essential Maintenance Practices six months from the initial application of the paint and annually thereafter, whenever occupancy changes and immediately after the occurrence of unexpected events which cause deterioration of the painted surfaces.

Enclosed you will find an inventory of the building components that you will need to inspect and several forms that will assist you in documenting your Essential Maintenance Plan-related activities. Also enclosed you will find the "Essential Maintenance for a Lead-Safe Home" brochure. Please make sure you read this brochure; it provides information you need to implement Essential Maintenance Practices.

C. <u>Elements of the Essential Maintenance Plan</u>

The Essential Maintenance Plan has 4 parts: an inventory of painted surfaces that need routine inspection and maintenance; a schedule and protocol for routine visual inspections; forms for documenting routine inspections and essential maintenance performed; and the booklet "Essential Maintenance for a Lead-Safe Home" that describes how to perform essential maintenance.

D. <u>"Paint Plus" Building Component Inventory</u>

The *"Paint Plus" Building Component Inventory Form* contains a list of all building components within your dwelling unit where paint plus essential maintenance practices was used by the contractor. It is organized first by <u>Room Name</u>, and then lists <u>Building Component</u> and <u>Location in the Room</u>. These are the specific building components that must be visually inspected and properly maintained.

E. Scheduled Visual Inspections of Building Components

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F. How to do a visual inspection

When performing your inspection, check each building component for signs of:

- (1) Flaking paint
- (2) Peeling paint
- (3) Cracking paint
- (4) Paint chips
- (5) Dust on window sills
- (6) Dust on the floor

If the building component is damaged and/or needs repair, follow the **Safe Work Practices** referred to in the enclosed brochure, "<u>Essential Maintenance for a Lead-Safe Home</u>".

G. What to do after your visual inspection

After completing the routine visual inspection, fill in the enclosed form, "**Visual Inspection Form**" to document that you have done your visual inspection(s). Save this form with your Essential Maintenance Practices Plan.

H. Documenting Essential Maintenance Practices Plan Requirements

Included are forms used to record your Essential Maintenance Practice-related activities. It includes a signature sheet that is to be used to document that you have read and understand the Essential Maintenance Practices Plan requirements.

I. Forms/Signature Sheet

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- (3) Visual Inspection Form; and
- (4) Essential Maintenance for a Lead-Safe Home brochure.

Understanding the Requirements of the Essential Maintenance Practices Plan

I/We have read and understand the requirements of the Essential Maintenance Practices Plan, and agree to maintain this facility in accordance with the developed Essential Maintenance Practices Plan.

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Applicant Signature

Co-Applicant Signature

Date

Date

UNIT # _____

BUILDING COMPONENT INVENTORY FORM

The following listing shows the type and location of those building components where Paint Plus Essential Maintenance Practices was used as a lead hazard control method by a lead abatement contractor to eliminate lead hazards. These are the specific building components that must be visually inspected and properly maintained to prevent lead hazards from redeveloping.

RESIDENTIAL UNIT:

Room Name	Building Component	Location in Room

VISUAL INSPECTION FORM AND ESSENTIAL MAINTENANCE RECORD

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RESIDENTIAL UNIT:

Room Name	Building Component	Location in Room	Changed Noted	Maintenance Needed	Date Maintenance Completed

INSPECTION DATE

	☐ State Lead	Federal Lead	Healthy Homes	DHHS Projec	t Type: D Single-Far	nily D Multi-Family
Agency (CAA):	. <u></u>			CAA Rep Name:		
				CAA Rep Title:		
					: 	
				CAA Rep Linaii.		
Applicant (Owner):	:		Co-/	Applicant:		
Property:			Ten	ant:		
			Unit	:#:		
Apartment/Unit	#:			A	re children covered	by MaineCare?
Total # of rooms	in unit:				Yes	No
# of children with	n EBLL:					
Key Dates:						
Enrollment date			\	Nork started date		
Assessed date			(Clearance achieve	ed date	
# of rooms treate	ed in unit:					
Areas Abated (ch	neck all tha	t apply):				
□ Interior				Basement		
□ Exterior				Ground floor	r	
	Area			Upper level	s)	
Crawl space	се			Attic		
Relocation Total:	:	\$				
Abatement Total	: -	\$		_		
		¥		_		

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LEAD HAZARD REDUCTION GRANT PROGRAM (Federal Lead) MAINE LEAD PAINT HAZARD ABATEMENT PROGRAM (State Lead)

LEAD PAINT PLUS ESSENTIAL MAINTENANCE PLAN

Project Funding: Agency (CAA):	State Lead	Federal Lead	Healthy Home	CA. CA. CA.	A Rej A Rej A Rej	Project Type: p Name: p Title: p Phone: p Email:	Single-Family	Multi-Family
Applicant (Owne	r):		(Co-Applica	nt:			
Property:			(Contractor:				
Unit #:			I	nspection	Date	e:		

RESIDENTIAL UNIT:

A. <u>Overview</u>

Paint Plus Essential Maintenance Plan ("Paint Plus") is an interim (short-term) method used by lead contractors and property owners to temporarily eliminate lead hazards. Interim controls are achieved through the removal of any chipping, cracking, and flaking paint plus the application of a new protective coating of paint in conjunction with the implementation of a written essential maintenance plan. This method cannot be used on impact or friction surfaces (e.g. floors, stair treads/risers, thresh holds, window sashes, parting beads, stops, window wells, doorjambs and edges).

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G. What to do after your visual inspection

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Understanding the Requirements of the Essential Maintenance Practices Plan

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Applicant Signature

Co-Applicant Signature

Date

Date

UNIT # _____

BUILDING COMPONENT INVENTORY FORM

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RESIDENTIAL UNIT:

Room Name	Building Component	Location in Room

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RESIDENTIAL UNIT:

Room Name	Building Component	Location in Room	Changed Noted	Maintenance Needed	Date Maintenance Completed

INSPECTION DATE

Project Funding:	State Lead	☐ Federal Lead	Healthy Homes	DHHS Pr CAA Rep Na CAA Rep Tit CAA Rep Ph	ame:	Single-Family	☐ Multi-Family
				CAA Rep En	-		
Applicant (Owner):			Co-/	Applicant:			
Property:			Tena Unit				
Apartment/Unit #	:				Are chil	dren covered by	MaineCare?
Total # of rooms i	n unit:					Yes	No
# of children with	EBLL:						
Key Dates:							
Enrollment date			\	Vork started c	date		
Assessed date			(Clearance ach	nieved date		
# of rooms treated	d in unit:						
Areas Abated (cho	eck all that	t apply):					
□ Interior				Baseme	nt		
□ Exterior				Ground f	floor		
Common A	rea			D Upper le	evel(s)		
Crawl spac	e			Attic			
Relocation Total:		\$		_			
Abatement Total:	_	\$		_			

U	Ν	IT	#
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LEAD HAZARD REDUCTION GRANT PROGRAM (Federal Lead) MAINE LEAD PAINT HAZARD ABATEMENT PROGRAM (State Lead)

LEAD PAINT PLUS ESSENTIAL MAINTENANCE PLAN

Project Funding: Agency (CAA):	State Lead	Federal Lead	Healthy Home	CAA R CAA R CAA R	Project Type: ep Name: ep Title: ep Phone: ep Email:	Single-Family	☐ Multi-Family
Applicant (Owne	r):		(Co-Applicant:			
Property:			(Contractor:			
Unit #:			I	nspection Dat	e:		

RESIDENTIAL UNIT:

A. <u>Overview</u>

Paint Plus Essential Maintenance Plan ("Paint Plus") is an interim (short-term) method used by lead contractors and property owners to temporarily eliminate lead hazards. Interim controls are achieved through the removal of any chipping, cracking, and flaking paint plus the application of a new protective coating of paint in conjunction with the implementation of a written essential maintenance plan. This method cannot be used on impact or friction surfaces (e.g. floors, stair treads/risers, thresh holds, window sashes, parting beads, stops, window wells, doorjambs and edges).

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If the building component is damaged and/or needs repair, follow the **Safe Work Practices** referred to in the enclosed brochure, "<u>Essential Maintenance for a Lead-Safe Home</u>".

G. What to do after your visual inspection

After completing the routine visual inspection, fill in the enclosed form, "**Visual Inspection Form**" to document that you have done your visual inspection(s). Save this form with your Essential Maintenance Practices Plan.

H. Documenting Essential Maintenance Practices Plan Requirements

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I. Forms/Signature Sheet

- (1) Understanding the Requirements of the Essential Maintenance Practices Plan Signature Sheet;
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Understanding the Requirements of the Essential Maintenance Practices Plan

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Applicant Signature

Co-Applicant Signature

Date

Date

UNIT # _____

BUILDING COMPONENT INVENTORY FORM

The following listing shows the type and location of those building components where Paint Plus Essential Maintenance Practices was used as a lead hazard control method by a lead abatement contractor to eliminate lead hazards. These are the specific building components that must be visually inspected and properly maintained to prevent lead hazards from redeveloping.

RESIDENTIAL UNIT:

Room Name	Building Component	Location in Room

VISUAL INSPECTION FORM AND ESSENTIAL MAINTENANCE RECORD

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RESIDENTIAL UNIT:

Room Name	Building Component	Location in Room	Changed Noted	Maintenance Needed	Date Maintenance Completed

INSPECTION DATE

Project Funding:	State Lead	☐ Federal Lead	Healthy Homes			Family D Multi-Family				
	. <u></u>									
		CAA Rep Email:								
Applicant (Owner):		Co-	Co-Applicant:							
Property:		Tenant:								
		Unit #:								
Apartment/Unit #:				Are children covered by MaineCare?						
Total # of rooms in unit:					Yes	Νο				
# of children with	EBLL:				_					
Key Dates:										
Enrollment date			\	Work started date						
Assessed date				Clearance achieved date						
# of rooms treate	d in unit:									
Areas Abated (ch	eck all that	t apply):								
□ Interior				□ Basement						
□ Exterior				Ground floor						
Common A	Common Area			□ Upper level(s)						
Crawl space				□ Attic						
	ce									
Relocation Total:		\$								