

**LEAD INSPECTION REPORT**Notice to Correct Lead Hazards Y ☒ N ☐ Notice of Violation Y ☐ N ☒**Property Information**

323 Maple St.		Single Family		Woonsocket 02895	
Street Address		Unit		City & Zip Code	
1	10	1920	23-G	255-17	0
# Units	# Rooms	Year Built	Plat	Lot	# Children < 6 Years

Regulated Facility: Y ☒ N ☐ Owner- Occupied Dwelling Unit: Y ☒ N ☐ Owner-Occupied Premises: Y ☒ N ☐**Property Owner Information**

Roger & Jacqueline Plante	
Name(s)	
323 Maple St.	Woonsocket, RI 02895
Street Address	City, State, Zip Code
Phone	Other Contact

Inspection InformationDate of Initial Inspection: 10/11/23 ☒ Comprehensive ☐ Partial ☐ Clearance ☐ RenewalDate of Follow-up Inspection _____ ☐ Comprehensive ☐ Partial ☐ Clearance ☐ RenewalMedia Tested (check all that apply): ☒ Paint ☒ Dust ☒ Soil ☒ Water


Reason for Inspection (check all that apply):

<input type="checkbox"/> Department of Health Initiated	<input type="checkbox"/> School or Child Care Center
<input checked="" type="checkbox"/> HUD	<input type="checkbox"/> Real Estate Transaction
<input type="checkbox"/> Other Agency _____	<input type="checkbox"/> Private Client – Other _____

Inspection Company Information

Environmental Lead Detection, Inc.	436 Gardners Neck Rd
Company Name	Street Address
Swansea, MA 02777	(508) 674-8730
City, State, Zip Code	Phone
	Other Contact

Lead Inspector Information

John Eastman	
Print Name	Signature
RIDOH License # <u>LI0004</u>	Expiration <u>1/31/2025</u>

RIDOH License # _____

Print Name of Apprentice (if applicable)

This inspection was conducted by the above licensed lead professional(s) in accordance with the Rhode Island Department of Health rules and regulations for Lead Poisoning Prevention (216-RICR-50-15-3), as amended.

All property owners must disclose lead inspection results to current/future tenants and prospective buyers.



REQUIRED ACTIONS FOLLOWING INSPECTION

This report documents the findings of the lead inspection for each room or area inspected and all media tested (i.e. paint, dust, soil, water). Each inspection page contains a “Lead” column which indicates whether the surface or media was Lead-Free (F), Lead-Safe (S), Conditionally Lead-Safe (C), or Lead-Hazard (H), as defined below, at the time of the inspection.

Rhode Island Department of Health (RIDOH) Definitions

Lead-Free means the paint or soil contains lead below the RIDOH Lead-Free threshold and no treatments are required.

Lead-Safe means the lead concentration in the paint/media is within the RIDOH Lead-Safe concentration range and no treatments are required. All painted surfaces constructed after 1/1/1978 may be assumed to be Lead-Safe and testing is not required.

Conditionally Lead-Safe means the surface/media requires routine maintenance (i.e. keeping lead painted surfaces intact and soil covered with grass, mulch, etc.) and renewal inspections every two years to recertify the Lead-Safe conditions. The renewal inspections must include a visual inspection of all Conditionally Lead-Safe areas and interior dust wipe sampling by a RIDOH-licensed Lead Inspector.

Assumed Positive means all painted surfaces constructed before 1/1/1978 must be “assumed positive” (AP) for lead, unless determined otherwise by a RIDOH-licensed Lead Inspector.

Lead-Hazard means damaged paint, interior dust, bare soil, or drinking water above the RIDOH Lead-Safe thresholds. The surface/media require treatment in accordance with RIDOH Regulation 216-RICR-50-15-3 – Lead Poisoning Prevention to obtain Lead-Free, Lead-Safe, or Conditional Lead-Safe Status.

Regulated Facility means all residential rental units, all properties where a child younger than six years old lives or is expected to live in the next 12 months for 14 or more days per year, and all child care centers including preschools and kindergarten classrooms.

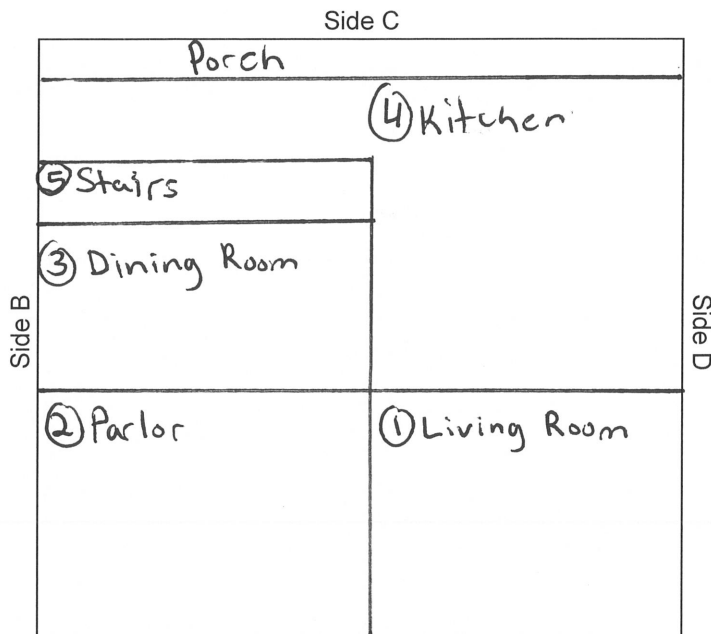
Required Actions if Lead Hazards are Identified at a Regulated Facility

- 1. NOTICE TO CORRECT LEAD HAZARDS:** A Notice to Correct Lead Hazards requires property owners to correct the environmental lead hazards identified in this report within **90 days** of receipt of the notice. (Exterior paint and soil hazards identified between November 1st and March 31st must be corrected by the following June 30th.) Except for “Spot Removal Exemption” areas, a licensed Lead Renovation Firm or Lead Contractor must perform the work.
- 2. NOTICE OF VIOLATION:** A Notice of Violation requires property owners to correct **all** environmental lead hazards within **30 days** of receipt of the notice. (Exterior paint and soil hazards identified between November 1st and March 31st must be corrected by the following June 30th.) A licensed Lead Contractor must perform the work unless RIDOH approves a variance request in writing.
- 3. EXTENSION:** Property owners may request an extension to the above compliance period(s) by submitting in writing detailed information on the reason(s) for the delay, the person who will correct the hazards, and by what date. Mail requests to the Lead Program Manager, RI Department of Health, Room 206, 3 Capitol Hill, Providence, RI 02908, fax to (401) 222-2456 or 222-7759, or e-mail to doh.leadprogram@health.ri.gov within 20 days of receiving this report.
- 4. SPOT REMOVAL EXEMPTION:** A licensed Lead Renovation Firm or Lead Contractor is not required when the scope of work does not exceed **6 ft² of interior lead-based paint** or **20 ft² of exterior lead-based paint**, provided that the work does not include window replacement or interior demolition and no work practices prohibited by 216-RICR-50-15-3 are used. **A licensed Lead Renovation Firm or Lead Contractor is always required for window replacement or interior demolition.**
- 5. CLEARANCE INSPECTION:** A Clearance Inspection by a Lead Inspector is required when lead hazard reduction or lead hazard control work is completed. This Clearance Inspection must include a visual inspection of all Lead-Hazard areas/media identified in this report and for interior work, **dust wipe sampling** in accordance with 216-RICR-50-15-3. As a minimum, the EPA Cleaning Verification Procedure by a certified Lead Renovator is required for interior renovation, repair, and painting (RRP) work.

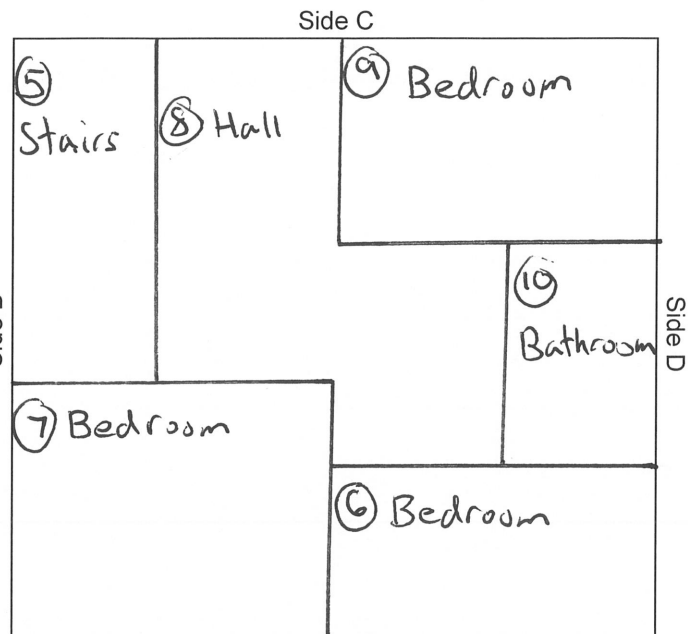
- For questions regarding this property and inspection report, lead hazard reduction or lead hazard control options, and regulatory requirements, contact the Lead Inspector listed on page 1 of this report.
- For additional information about lead, including properties with lead violations, and to find a licensed lead professional, call the Center for Healthy Homes and Environment at (401) 222-7796 or visit www.health.ri.gov/healthrisks/poisoning/lead
- For additional requirements regarding rental properties and Certificates of Conformance, call (401) 222-4892 or visit the Housing Resources Commission at <http://ohcd.ri.gov/lead-healthy-housing/>.



FLOOR PLAN PROPERTY SKETCH (BLOCK)

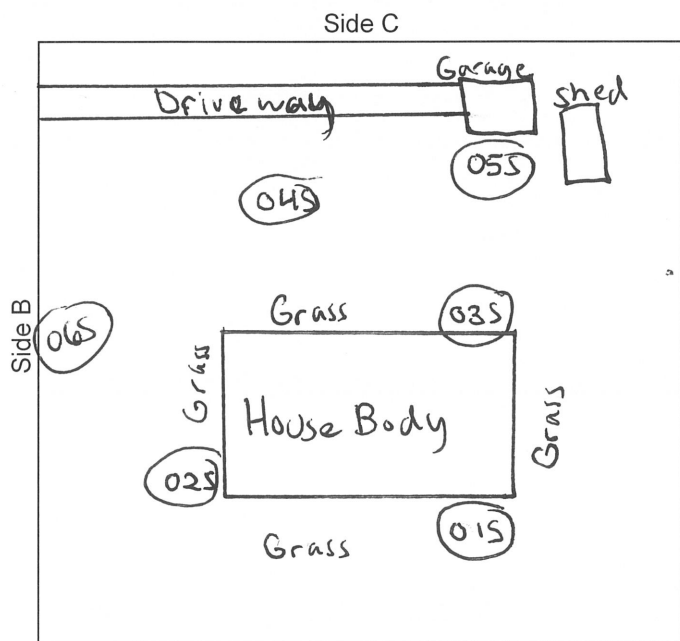
Street Address: 323 Maple St Unit: SF City: WoonsocketFloor 1Floor 2

Side A (Address Street)

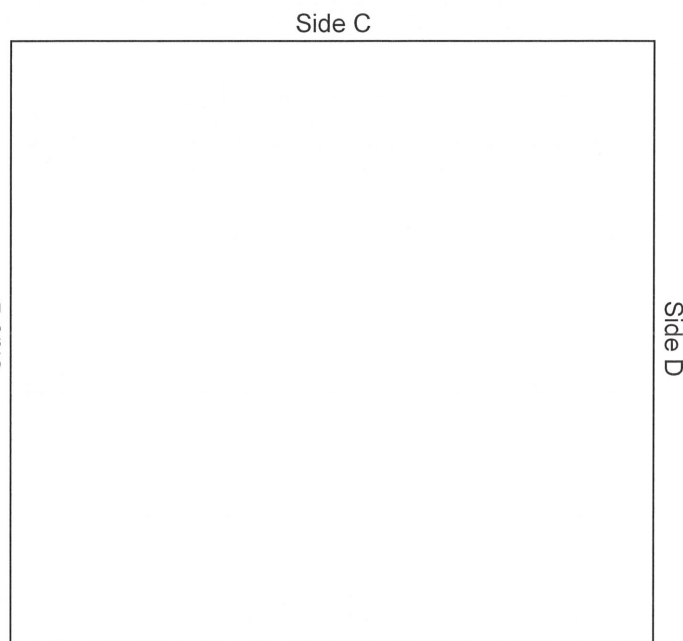
Floor Exterior

Side A (Address Street)

Floor _____



Side A (Address Street)



Side A (Address Street)

Initials JEE Date 10/11/23

Street Address: 323 Maple St Unit: SF City: Woonsocket**REPORT KEY****XRF:**

Positive means greater than or equal to 1.0 mg/cm² or **AP** = Assumed Positive for pre-1978 paint
Negative means less than 1.0 mg/cm² or **78** = post-1978 paint
Inconclusive is in accordance with the XRF manufacturer's Performance Characteristic Sheet (PCS)

Test Kit:

Positive reaction (pink or red) is "+" **Inconclusive** (no reaction) is "-"

Paint Chip Sample:

Lead-Free means less than 90 ppm
Lead-Safe means 90 ppm to less than 5,000 ppm or post-1978
Conditionally Lead-Safe means **INTACT** lead-based paint greater than or equal to 5,000 ppm (percent by weight) or 1.0 mg/cm² (by measured area)
Lead-Hazard means **DAMAGED** lead-based paint greater than or equal to 5,000 ppm or 1.0 mg/cm²

Paint Condition:

N=No Paint **I**=Intact **D**=Damaged **AD**=Assumed Damaged **B**=Binding or Friction

Lead:

F=Lead-Free **S**=Lead-Safe **C**=Conditionally Lead-Safe **H**=Lead-Hazard

Remedy:

COV=Covered **MI**=Made Intact **REM**=Removed **REP**=Replaced

XRF CALIBRATION DATAManufacturer, Model & Serial # SciAps X-550 00639Standard Type (check one): Manufacturer ☒ NIST ☐ Other (specify) _____

Standard (mg/cm ²)	Time of Test	Reading 1	Reading 2	Reading 3	Average (mg/cm ²)	Tolerance
1.0	12:25	1.1	1.0	1.1	1.1	+0.1
1.0	2:15	1.0	1.0	1.1	1.0	0.0

Comments:Initials JEEDate 10/11/23



INTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978)

page 7 of 22Street Address: 323 Maple StUnit: SF City: WoonsocketRoom #: 3 Description: Dining Room

Surface	Side	Pb	Condition	Lead	Remedy
Ceiling		<u>CU</u>	<u>1</u>	<u>C</u>	
Crown Molding	<u>All</u>	<u>0.0</u>			
Wall	<u>A</u>	<u>0.1</u>			
Wall	<u>B</u>	<u>0.0</u>			
Wall	<u>C</u>	<u>0.0</u>			
Wall	<u>D</u>	<u>0.0</u>			
Chair Rail	<u>X</u>	<u>1</u>			
Baseboard	<u>All</u>	<u>0.0</u>			
Radiator	<u>X</u>	<u>1</u>			
Floor		<u>0.1</u>			
Door	<u>A</u>	<u>1</u>			
Door Casing	<u>1</u>	<u>0.0</u>			
Door Jamb	<u>1</u>	<u>0.2</u>			
Threshold	<u>1</u>	<u>1</u>			
Door	<u>D</u>	<u>0.2</u>			
Door Casing	<u>1</u>	<u>0.0</u>			
Door Jamb	<u>1</u>	<u>2.7</u>	<u>D/B</u>	<u>H</u>	
Threshold	<u>1</u>	<u>0.0</u>			
Door	<u>X</u>				
Door Casing	<u>X</u>				
Door Jamb	<u>X</u>				
Threshold	<u>X</u>				
Door	<u>X</u>				
Door Casing	<u>X</u>				
Door Jamb	<u>X</u>				
Threshold	<u>X</u>				
Closet Door	<u>X</u>				
Closet Casing	<u>X</u>				
Closet Jamb	<u>X</u>				
Closet Ceiling	<u>X</u>				
Closet Wall	<u>X</u>				
Closet Shelf	<u>X</u>				
Shelf Support	<u>X</u>				
Closet Pole	<u>X</u>				
Cl Baseboard	<u>X</u>				
Closet Floor	<u>X</u>				

Surface	Side	Pb	Condition	Lead	Remedy
Window Sill	<u>B</u>	<u>0.0</u>			
Window Apron	<u>1</u>	<u>0.1</u>			
Window Casing	<u>1</u>	<u>0.0</u>			
Window Jamb	<u>CU</u>	<u>1</u>		<u>C</u>	
Interior Stop	<u>1</u>	<u>0.1</u>			
Interior Sash			<u>N</u>	<u>F</u>	
Window Well	<u>X</u>	<u>AP</u>	<u>AD</u>	<u>H</u>	
Window Track			<u>N</u>	<u>F</u>	
Exterior Sash			<u>N</u>	<u>F</u>	
Exterior Stop	<u>1</u>	<u>AP</u>	<u>AD</u>	<u>H</u>	
Window Sill	<u>X</u>				
Window Apron	<u>X</u>				
Window Casing	<u>X</u>				
Window Jamb	<u>X</u>				
Interior Stop	<u>X</u>				
Interior Sash	<u>X</u>				
Window Well	<u>X</u>				
Window Track	<u>X</u>				
Exterior Sash	<u>X</u>				
Exterior Stop	<u>X</u>				
Window Sill	<u>X</u>				
Window Apron	<u>X</u>				
Window Casing	<u>X</u>				
Window Jamb	<u>X</u>				
Interior Stop	<u>X</u>				
Interior Sash	<u>X</u>				
Window Well	<u>X</u>				
Window Track	<u>X</u>				
Exterior Sash	<u>X</u>				
Exterior Stop	<u>X</u>				

XRF: Positive $\geq 1.0 \text{ mg/cm}^2$, Test Kit "+", or "AP" = Assumed Positive; Negative $< 1.0 \text{ mg/cm}^2$ or "78" = Post-1978

Condition: N = No Paint; I = Intact; D = Damaged; AD = Assumed Damaged; B = Binding or Friction

Lead: F = Lead-Free; S = Lead-Safe; C = Conditionally Lead-Safe (Positive/Intact); H = Lead-Hazard (Positive/Damaged)

Remedy: COV = Covered; MI = Made Intact; REM = Removed; REP = Replaced

to Storm Windows

Initials JEE Date 10/11/23



INTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978)

page 8 of 22Street Address: 323 Maple StUnit: SFCity: WoonsocketRoom #: 4Description (check one): ☒ Kitchen ☐ Pantry ☐ Bathroom

Surface	Side	XRF	Condition	Lead	Remedy
Ceiling		0.0			
Crown Molding	X	/			
Wall	A	0.0			
Wall	B	0.0			
Wall	C	0.1			
Wall	D	0.0			
Chair Rail	All	0.0			
Baseboard	X	/			
Radiator	X	/			
Floor		COV	I	C	
Door	A1	/			
Door Casing	I	0.0			
Door Jamb	I	2.3	D	H	
Threshold	I	/			
Door	A2	0.0			
Door Casing	I	0.0			
Door Jamb	I	2.6	D/B	H	
Threshold	I	0.5			
Door	B1	0.0			
Door Casing	I	0.0			
Door Jamb	I	2.9	D	H	
Threshold	I	0.0			
Door	B2	/			
Door Casing	I	0.0			
Door Jamb	I	2.2	D	H	
Threshold	I	/			
Closet Door	A	0.0			
Closet Casing	I	/			
Closet Jamb	I	2.6	D	H	
Closet Ceiling	I	7.8	D	H	
Closet Wall	I	6.6	AD	H	
Closet Shelf	I	0.2			
Shelf Support	I	5.0	AD	H	
Closet Pole	I	/			
Cl Baseboard	I	/			
Closet Floor	I	COV	I	C	

Surface	Side	XRF	Condition	Lead	Remedy
Window Sill	X2 C	0.0			
Window Apron	I	/			
Window Casing	I	0.1			
Window Jamb	I	COV	I	C	
Interior Stop	I	0.0			
Interior Sash	I		N	F	
Window Well	I				
Window Track	I				
Exterior Sash	I				
Exterior Stop	I				
Window Sill	X2 D	0.0			
Window Apron	I	/			
Window Casing	I	0.0			
Window Jamb	I	COV	I	C	
Interior Stop	I	0.1			
Interior Sash	I		N		
Window Well	X	AP	AD	H	
Window Track	I		N	F	
Exterior Sash	I		N	F	
Exterior Stop	I	AP	AD	H	
Upper Cab Door	All	Post 78			
Upper Cab Frame	I				
Upper Cab Wall	I				
Upper Cab Shelf	I				
Shelf Support	I				
Lower Cab Door	All	Post 78			
Lower Cab Frame	I				
Lower Cab Wall	I				
Lower Cab Shelf	I				
Shelf Support	I				
Cabinet Drawer	I				

XRF: Positive ≥ 1.0 mg/cm², Test Kit "+", or "AP" = Assumed Positive; Negative < 1.0 mg/cm² or "78" = Post-1978

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Remedy: COV = Covered; MI = Made Intact; REM = Removed; REP = Replaced

X Storm Windows

Initials JEE Date 10/11/23



INTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978)

page 9 of 22Street Address: 323 Maple St Unit: SF City: WoonsocketRoom #: 4 Description (check one): ☒ Kitchen ☐ Pantry ☐ Bathroom
cont.

Surface	Side	XRF	Condition	Lead	Remedy
Ceiling	X				
Crown Molding	X				
Wall <u>Cover</u>	<u>All</u>	<u>00</u>			
Wall	X				
Wall	X				
Wall	X				
Chair Rail	X				
Baseboard	X				
Radiator	X				
Floor	X				
Door	<u>B3</u>	<u>00</u>			
Door Casing	<u>↓</u>	<u>00</u>			
Door Jamb	<u>↓</u>	<u>30</u>	<u>D</u>	<u>H</u>	
Threshold	<u>↓</u>	<u>1.7</u>	<u>I</u>	<u>C</u>	
Door	<u>C</u>	<u>00</u>			
Door Casing	<u>↓</u>	<u>00</u>			
Door Jamb	<u>↓</u>	<u>00</u>			
Threshold	<u>↓</u>		<u>N</u>	<u>F</u>	
Door	X				
Door Casing	X				
Door Jamb	X				
Threshold	X				
Door	X				
Door Casing	X				
Door Jamb	X				
Threshold	X				
Closet Door	X				
Closet Casing	X				
Closet Jamb	X				
Closet Ceiling	X				
Closet Wall	X				
Closet Shelf	X				
Shelf Support	X				
Closet Pole	X				
CI Baseboard	X				
Closet Floor	X				

Surface	Side	XRF	Condition	Lead	Remedy
Window Sill	X				
Window Apron	X				
Window Casing	X				
Window Jamb	X				
Interior Stop	X				
Interior Sash	X				
Window Well	X				
Window Track	X				
Exterior Sash	X				
Exterior Stop	X				
Window Sill	X				
Window Apron	X				
Window Casing	X				
Window Jamb	X				
Interior Stop	X				
Interior Sash	X				
Window Well	X				
Window Track	X				
Exterior Sash	X				
Exterior Stop	X				
Upper Cab Door	X				
Upper Cab Frame	X				
Upper Cab Wall	X				
Upper Cab Shelf	X				
Shelf Support	X				
Lower Cab Door	X				
Lower Cab Frame	X				
Lower Cab Wall	X				
Lower Cab Shelf	X				
Shelf Support	X				
Cabinet Drawer	X				

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Initials JEE Date 10/11/23



INTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978)

page 10 of 22

Street Address: 323 Maple St Unit: SF City: Woonsocket

Room #: 5 Description (check one): ☐ Hallway ☒ Staircase (separate page required for each one)

Surface	Side	Pb	Condition	Lead	Remedy
Ceiling		0.0			
Crown Molding	All	0.0			
Wall	A	0.1			
Wall	B	0.0			
Wall	C	0.0			
Wall	D	0.2			
Chair Rail	All	0.0			
Baseboard	All	2.8	I	C	
Radiator	X	/			
Floor		COV	I	C	
Door	D	/			
Door Casing	I	1.0	D	H	
Door Jamb	X	3.2	D	H	
Threshold	X	/			
Door	X				
Door Casing	X				
Door Jamb	X				
Threshold	X				
Door	X				
Door Casing	X				
Door Jamb	X				
Threshold	X				
Door	X				
Door Casing	X				
Door Jamb	X				
Threshold	X				
Closet Door	D				
Closet Casing	I	4.1	D	H	
Closet Jamb	I	/			
Closet Ceiling		0.0			
Closet Wall		0.0			
Closet Shelf		0.0			
Shelf Support		0.0			
Closet Pole		/			
Cl Baseboard	X	/			
Closet Floor	X	COV	I	C	

Surface	Side	Pb	Condition	Lead	Remedy
Window Sill	X				
Window Apron	X				
Window Casing	X				
Window Jamb	X				
Interior Stop	X				
Interior Sash	X				
Window Well	X				
Window Track	X				
Exterior Sash	X				
Exterior Stop	X				
Window Sill	X				
Window Apron	X				
Window Casing	X				
Window Jamb	X				
Interior Stop	X				
Interior Sash	X				
Window Well	X				
Window Track	X				
Exterior Sash	X				
Exterior Stop	X				
Newel Post	All	3.6	D	H	
Railing Cap	All	2.9	D	H	
Handrail	All	0.0			
Baluster	X	/			
Lower Rail	X	/			
Stair Tread	All	COV	I	C	
Stair Riser	All	COV	I	C	
Stringer	All	2.4	D	H	
Floor Casing	X	/			
Floor Edge	X	/			
Wall Casing	D	0.2			
Cover Walls	All	0.0			

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Initials JEE Date 10/11/23



INTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978)

page 12 of 22Street Address: 323 Maple StUnit: SF City: WoonsocketRoom #: 7 Description: Bedroom

Surface	Side	Pb	Condition	Lead	Remedy
Ceiling		0.0			
Crown Molding	A11	0.0			
Wall	A	0.0			
Wall	B	0.0			
Wall	C	0.0			
Wall	D	CU	I	C	
Chair Rail	X	—			
Baseboard	C	6.4	AD	H	
Radiator	X	—			
Floor		0.0			
Door	C	7.6	D	H	
Door Casing	I	10.0	I	C	
Door Jamb	I	9.5	D/B	H	
Threshold	↓	0.1			
Door	X				
Door Casing	X				
Door Jamb	X				
Threshold	X				
Door	X				
Door Casing	X				
Door Jamb	X				
Threshold	X				
Door	X				
Door Casing	X				
Door Jamb	X				
Threshold	X				
Closet Door	X				
Closet Casing	X				
Closet Jamb	X				
Closet Ceiling	X				
Closet Wall	X				
Closet Shelf	X				
Shelf Support	X				
Closet Pole	X				
Cl Baseboard	X				
Closet Floor	X				

Surface	Side	Pb	Condition	Lead	Remedy
Window Sill	A	2.6	I	C	
Window Apron	I	10.0	I	C	
Window Casing	I	7.8	D	H	
Window Jamb	I	4.3	I	C	
Interior Stop	I	6.3	I	C	
Interior Sash			N	F	
Window Well	X	AP	AD	H	
Window Track			N	F	
Exterior Sash			N	F	
Exterior Stop	↓	AP	AD	H	
Window Sill	B	Rep 1578			
Window Apron	I				
Window Casing	I				
Window Jamb	I				
Interior Stop	I				
Interior Sash					
Window Well					
Window Track					
Exterior Sash					
Exterior Stop	↓				
Window Sill	X				
Window Apron	X				
Window Casing	X				
Window Jamb	X				
Interior Stop	X				
Interior Sash	X				
Window Well	X				
Window Track	X				
Exterior Sash	X				
Exterior Stop	X				

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* Storm Windows

Initials JEE Date 10/11/23



INTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978)

page 13 of 22Street Address: 323 Maple StUnit: SF City: WoonsocketRoom #: 8 Description (check one): ☒ Hallway ☐ Staircase (separate page required for each one)

Surface	Side	Pb	Condition	Lead	Remedy
Ceiling		0.0			
Crown Molding	A11	0.0			
Wall	A	3.3	I	C	
Wall	B	2.9	I	C	
Wall	C	2.5	I	C	
Wall	D	0.0			
Chair Rail	A11	0.0			
Baseboard	A11	6.6	D	H	
Radiator	X	✓			
Floor		SW	I	C	
Door	A1	7.8	D	H	
Door Casing	↓	0.0			
Door Jamb	↓	9.5	D	H	
Threshold	↓	0.2			
Door	A2	7.2	D	H	
Door Casing	↓	6.5	D	H	
Door Jamb	↓	5.8	I	C	
Threshold	↓	0.1			
Door	B	0.0			
Door Casing	↓	0.0			
Door Jamb	↓	0.0			
Threshold	↓	✓			
Door	CD	5.1	I	C	
Door Casing	↓	10.0	I	C	
Door Jamb	↓	5.6	D	H	
Threshold	↓	0.2			
Closet Door	B	0.0			
Closet Casing	↓	0.0			
Closet Jamb	↓	0.0			
Closet Ceiling	↓	0.1			
Closet Wall	↓	0.4			
Closet Shelf	↓	✓			
Shelf Support	↓	0.2			
Closet Pole	↓	X	N	F	
Cl Baseboard	↓	1.3	AD	H	
Closet Floor	↓	0.0			

Surface	Side	Pb	Condition	Lead	Remedy
Window Sill	C	5.9	I	C	
Window Apron	↓	6.4	I	C	
Window Casing	↓	6.8	D	H	
Window Jamb	↓	2.2	I	C	
Interior Stop	↓	5.4	I	C	
Interior Sash	↓	N	N	F	
Window Well	X	AP	AD	H	
Window Track	↓	N	N	F	
Exterior Sash	↓	N	N	F	
Exterior Stop	↓	AP	AD	H	
Window Sill	X				
Window Apron	X				
Window Casing	X				
Window Jamb	X				
Interior Stop	X				
Interior Sash	X				
Window Well	X				
Window Track	X				
Exterior Sash	X				
Exterior Stop	X				
Newel Post	X				
Railing Cap	X				
Handrail	X				
Baluster	X				
Lower Rail	X				
Stair Tread	X				
Stair Riser	X				
Stringer	X				
Floor Casing	X				
Floor Edge	X				
Wall Casing	A	1.1	D	H	
Cave Wall	A11	0.0			
Attic Access		0.0			

XRF: Positive ≥ 1.0 mg/cm², Test Kit "+", or "AP" = Assumed Positive; Negative < 1.0 mg/cm² or "78" = Post-1978

Condition: N = No Paint; I = Intact; D = Damaged; AD = Assumed Damaged; B = Binding or Friction

Lead: F = Lead-Free; S = Lead-Safe; C = Conditionally Lead-Safe (Positive/Intact); H = Lead-Hazard (Positive/Damaged)

Remedy: COV = Covered; MI = Made Intact; REM = Removed; REP = Replaced

* Storm Window

Initials JEE Date 10/11/23



INTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978)

page 14 of 22Street Address: 323 Maple StUnit: SF City: WoonsocketRoom #: 9 Description: Bedroom

Surface	Side	Pb	Condition	Lead	Remedy
Ceiling		0.0			
Crown Molding	All	0.1			
Wall	A	0.0			
Wall	B	0.0			
Wall	C	0.2			
Wall	D	0.0			
Chair Rail	X	/			
Baseboard	All	0.0			
Radiator	X	/			
Floor		0.1			
Door	A	6.3	D/B	H	
Door Casing	I	0.3			
Door Jamb	I	8.3	D/B	H	
Threshold	I	0.3			
Door	D	0.0			
Door Casing	I	0.0			
Door Jamb	I	0.0			
Threshold	X	/			
Door	X				
Door Casing	X				
Door Jamb	X				
Threshold	X				
Door	X				
Door Casing	X				
Door Jamb	X				
Threshold	X				
Closet Door	D	CU			
Closet Door Casing	I	/			
Closet Jamb	I	0.1			
Closet Ceiling	I	CU	I	C	
Closet Wall	I	CU	I	C	
Closet Shelf	I	N	N	F	
Shelf Support	I	N	N	F	
Closet Pole	I	N	N	F	
Cl Baseboard	I	/			
Closet Floor	I	CU	I	C	

Surface	Side	Pb	Condition	Lead	Remedy
Window Sill	C	0.0			
Window Apron	I	0.1			
Window Casing	I	0.0			
Window Jamb	I	CU	I	C	
Interior Stop	I	0.0			
Interior Sash	I	N	N	F	
Window Well	X	AP	AD	H	
Window Track	I	N	N	F	
Exterior Sash	I	N	N	F	
Exterior Stop	I	AP	AD	H	
Window Sill	X				
Window Apron	X				
Window Casing	X				
Window Jamb	X				
Interior Stop	X				
Interior Sash	X				
Window Well	X				
Window Track	X				
Exterior Sash	X				
Exterior Stop	X				
Window Sill	X				
Window Apron	X				
Window Casing	X				
Window Jamb	X				
Interior Stop	X				
Interior Sash	X				
Window Well	X				
Window Track	X				
Exterior Sash	X				
Exterior Stop	X				

XRF: Positive ≥ 1.0 mg/cm², Test Kit "+", or "AP" = Assumed Positive; Negative < 1.0 mg/cm² or "78" = Post-1978

Condition: N = No Paint; I = Intact; D = Damaged; AD = Assumed Damaged; B = Binding or Friction

Lead: F = Lead-Free; S = Lead-Safe; C = Conditionally Lead-Safe (Positive/Intact); H = Lead-Hazard (Positive/Damaged)

Remedy: COV = Covered; MI = Made Intact; REM = Removed; REP = Replaced

* Storm Windows

Initials JEE Date 10/11/23



INTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978)

page 15 of 22Street Address: 323 Maple StUnit: SF City: WoonsocketRoom #: 10 Description (check one): ☐ Kitchen ☐ Pantry ☒ Bathroom

Surface	Side	XRF	Condition	Lead	Remedy
Ceiling		0.0			
Crown Molding	X	/			
Wall	A	COV	I	C	
Wall	B	COV			
Wall	C	COV			
Wall	D	COV	I	C	
Chair Rail	X	/			
Baseboard	A11	0.1			
Radiator	X	/			
Floor		COV	I	C	
Door	B	0.0			
Door Casing	I	0.0			
Door Jamb	↓	3.2	D/B	H	
Threshold	X	/			
Door	X				
Door Casing	X				
Door Jamb	X				
Threshold	X				
Door	X				
Door Casing	X				
Door Jamb	X				
Threshold	X				
Door	X				
Door Casing	X				
Door Jamb	X				
Threshold	X				
Closet Door	X				
Closet Casing	X				
Closet Jamb	X				
Closet Ceiling	X				
Closet Wall	X				
Closet Shelf	X				
Shelf Support	X				
Closet Pole	X				
Cl Baseboard	X				
Closet Floor	X				

Surface	Side	XRF	Condition	Lead	Remedy
Window Sill	D	/			
Window Apron	I	/			
Window Casing	I	/			
Window Jamb	I	/			
Interior Stop	I	/			
Interior Sash	I		N	F	
Window Well	X	AP	AD	H	
Window Track	I		N	F	
Exterior Sash	I		X	F	
Exterior Stop	↓	AP	AD	H	
Window Sill	X				
Window Apron	X				
Window Casing	X				
Window Jamb	X				
Interior Stop	X				
Interior Sash	X				
Window Well	X				
Window Track	X				
Exterior Sash	X				
Exterior Stop	X				
Upper Cab Door	X				
Upper Cab Frame	X				
Upper Cab Wall	X				
Upper Cab Shelf	X				
Shelf Support	X				
Lower Cab Door	A	Post 1978			
Lower Cab Frame	I				
Lower Cab Wall	I				
Lower Cab Shelf	I				
Shelf Support	I				
Cabinet Drawer	↓				

XRF: Positive ≥ 1.0 mg/cm², Test Kit "+", or "AP" = Assumed Positive; Negative < 1.0 mg/cm² or "78" = Post-1978

Condition: N = No Paint; I = Intact; D = Damaged; AD = Assumed Damaged; B = Binding or Friction

Lead: F = Lead-Free; S = Lead-Safe; C = Conditionally Lead-Safe (Positive/Intact); H = Lead-Hazard (Positive/Damaged)

Remedy: COV = Covered; MI = Made Intact; REM = Removed; REP = Replaced

* Storm Windows

Initials JEE Date 10/11/23



EXTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978)

page 18 of 22

Street Address: 323 Maple St

Unit: SF City: Woonsocket

Primary Structure: House Body

Surface	Side	Pb	Condition	Lead	Remedy
Siding	All	ca	I	C	
Corner Board	C	0.0			
Upper Trim	All	ca	I	C	
Lower Trim	C	0.0			
Storm Door	C		N	F	
Door upper	I	—			
Door Casing	I	ca			
Door Jamb	I	0.0			
Threshold	I		N	F	
Door Kickplate	I		N	F	
Storm Door	X				
Door lower	C	0.0			
Door Casing	I	ca	I	C	
Door Jamb	I	6.8	D	H	
Threshold	I	—			
Door Kickplate	X	—			
Storm Door	X				
Door	X				
Door Casing	X				
Door Jamb	X				
Threshold	X				
Door Kickplate	X				
Overhang	X				
Column	X				
Newel Post	C		N	F	
Railing Cap	C		N	F	
Baluster	C		N	F	
Lower Rail	C		N	F	
Handrail	X	C	I.1	D	H
Tread	C		N	F	
Riser	C		N	F	
Stringer	C		N	F	
Lattice	X				
Floor	C	5.8	D	H	
Pipe	D	0.0			

Surface	Side	Pb	Condition	Lead	Remedy
Window Sill	All	ca	I	C	
Window Casing	I	ca	I	C	
Window Sash	I	ca	I	C	
Window Sill	X				
Window Casing	X				
Window Sash	X				
Window Sill	X				
Window Casing	X				
Window Sash	X				
Window Sill	X				
Window Casing	X				
Window Sash	X				
Window Shutter	All		N	F	
Fire Escape	X				
BA Window Sill	B	0.2			
BA Window Sash	I	ca	I	C	
BA Window Frame	I	0.1			
BA Screen Frame	I		N	F	
BA Window Sill	D1	0.0			
BA Window Sash	I	ca	I	C	
BA Window Frame	I	0.0			
BA Screen Frame	I		N	F	
BA Window Sill	D2	0.0			
BA Window Sash	I	6.5	D	H	
BA Window Frame	I	6.9	D	H	
BA Screen Frame	X	—			
BA Window Sill	X				
BA Window Sash	X				
BA Window Frame	X				
BA Screen Frame	X				
Foundation	All		N	F	
Bulkhead	X				
Drain Pipe	X				
Electrical Conduit	X				
Lamp Post	X				
Fence	All		N	F	

XRF: Positive ≥ 1.0 mg/cm², Test Kit "+", or "AP" = Assumed Positive; Negative < 1.0 mg/cm² or "78" = Post-1978

Condition: N = No Paint; I = Intact; D = Damaged; AD = Assumed Damaged; B = Binding or Friction

Lead: F = Lead-Free; S = Lead-Safe; C = Conditionally Lead-Safe (Positive/Intact); H = Lead-Hazard (Positive/Damaged)

Remedy: COV = Covered; MI = Made Intact; REM = Removed; REP = Replaced

* Metal Mail
** At D Fence

Initials JEE Date 10/11/23

This form was developed by the Rhode Island Department of Health for use during private and State inspections.

FORM PBLC-23-6A (June 2018)



DUST INSPECTION

Street Address: 323 Maple St. Unit: S.F City: Woonsocket

Sampling Date: 10/11/23 Analyzing Laboratory or ELPAT Accreditation: Schneider Laboratories Global, Inc

Sample #	Room #/Side	Dust Wipe Surface	*Sample Area (Dimensions)	Lab Result (µg/ft²)	Lead
01D	Rm 1 / A	Entry Floor	12 x 12	< 5.00	S
02D	Rm 1 / D	Window Sill	3 1/2 x 30 1/2	52.00	S
03D	Rm 3 / A	Floor	12 x 12	< 5.00	S
04D	Rm 3 / B	Window Sill	3 1/2 x 31	103	H
05D	Rm 4 / C	Entry Floor	12 x 12	< 5.00	S
06D	Rm 4 / D	Window Sill	3 1/2 x 23 1/2	< 8.75	S
07D	Rm 9 / A	Floor	12 x 12	11.70	H
08D	Rm 9 / C	Window Sill	4 1/2 x 26 3/4	37.30	H
09D		Blank		< 5.00	
KEY: F = Lead-Free S = Lead-Safe H = Lead-Hazard *minimum 16 square inches; maximum 2 square feet					

Comments:

Initials JEE Date 10/11/23

**SOIL INSPECTION**Street Address: 323 Maple St. Unit: S.F City: WoonsocketSampling Date: 10/11/23 Analyzing Laboratory or ELPAT Accreditation: Schneider Laboratories Global, Inc*If soil sampling was not performed, check all reasons that apply:*Covered by Ice/Snow ☐ Covered by Debris ☐ Other ☐ (specify) _____

Sample #	Structure/Area	Side	Distance (ft. or in)	Depth (ft. or in)	Bare (Y or N)	Result (ppm)	Lead
01S	Primary	A	3 ft.	1 in.	Y	521	H
02S	Primary	B	1 ft.	1 in.	Y	455	H
03S	Primary	C	3 ft.	1 in.	Y	487	H
	Primary	D			N		C
	Play Area						
04S	Mid Yard	C	16 ft.	1 in.	Y	150	S
05S	Garage	A	3 ft.	1 in.	Y	310	S
	Shed						
	Fence						
	Play Equipment						
	Outdoor Furniture						
06S	Other	B	20 ft.	1 in.	Y	151	S
KEY: F = Lead-Free S = Lead-Safe C = Conditionally Lead-Safe (covered) H = Lead-Hazard							

Indicate location(s) of soil sample collection on Form PBLC-23-3

Comments: Sample 06S was taken in the B side of the yard.Initials JEE Date 10/11/23

**WATER INSPECTION**Street Address: 323 Maple St. Unit: S.F City: WoonsocketSampling Date: 10/11/23 Analyzing Laboratory: Schneider Laboratories Global, Inc**Water Source:** Public Water Supplier: City of Woonsocket ☐ Private Well ☐ Unknown ☐(Check all that apply): Lead Service Line ☐ Lead Pipe / Gooseneck ☐ Non-Lead Service Line ☐ Unknown ☒

Sample #	Room #/Fixture	*First Draw (Y/N)	**Flushed Sample (Y/N)	Result (ppb)	Lead Hazard (Y/N)
1W	Kitchen/Sink	N	Y	< 5.00	N
*First Draw Sample: Has it been at least 6 hours since any water was last used? **Flushed Sample: Collected after one minute or until water turns cold					

RIDOH RECOMMENDED ACTIONS (Check all that apply):

- ☒ Use only cold water for drinking and cooking.
- ☒ Do not consume water without flushing until temperature drops.
- ☐ Do not consume water until lead level(s) <15 ppb is achieved.
- ☐ Owner must provide bottled water for cooking and drinking until RIDOH approves additional lead sampling results.
- ☐ Owner must label all taps "Lead Warning: Do not use for drinking or cooking".
- ☐ Filtration systems must be maintained and filters replaced per manufacturer's instructions.
- ☐ Other (specify) _____

Comments:Initials JEE Date 10/11/23



Analysis Report

Schneider Laboratories Global, Inc

2512 W. Cary Street • Richmond, Virginia • 23220-5117
804-353-6778 • 800-785-LABS (5227) • Fax 804-359-1475

Customer ENVIRONMENTAL LEAD DETECTION (482)
Address 436 Gardners Neck Rd
Swansea, MA 02777-3105

Order #: 535875

Matrix Wipe
Received 10/13/23
Analyzed 10/14/23
Reported 10/16/23

Project 323 Maple St
Location Woonsocket, RI
Number

Sample ID	Cust. Sample ID	Location	Sample Date			
Parameter		Method	Area	Total	Conc.	RL*
535875-001	01D	Rm 1 Entry FL	10/11/23			
Lead		EPA 7000B	1.00 ft2	<5.00 µg/wipe	<5.00 µg/ft2	5.00 µg/ft2
535875-002	02D	Rm 1 Sill	10/11/23			
Lead		EPA 7000B	0.741 ft2	38.6 µg/wipe	52.0 µg/ft2	6.74 µg/ft2
535875-003	03D	Rm 3 Floor	10/11/23			
Lead		EPA 7000B	1.00 ft2	<5.00 µg/wipe	<5.00 µg/ft2	5.00 µg/ft2
535875-004	04D	Rm 3 Sill	10/11/23			
Lead		EPA 7000B	0.753 ft2	77.5 µg/wipe	103 µg/ft2	6.64 µg/ft2
535875-005	05D	Rm 4 Entry FL	10/11/23			
Lead		EPA 7000B	1.00 ft2	<5.00 µg/wipe	<5.00 µg/ft2	5.00 µg/ft2
535875-006	06D	Rm 4 Sill	10/11/23			
Lead		EPA 7000B	0.571 ft2	<5.00 µg/wipe	<8.75 µg/ft2	8.75 µg/ft2
535875-007	07D	Rm 9 Floor	10/11/23			
Lead		EPA 7000B	1.00 ft2	11.7 µg/wipe	11.7 µg/ft2	5.00 µg/ft2
535875-008	08D	Rm 9 Sill	10/11/23			
Lead		EPA 7000B	0.836 ft2	31.1 µg/wipe	37.3 µg/ft2	5.98 µg/ft2
535875-009	09D	Blank	10/11/23			
Lead		EPA 7000B		<5.00 µg/wipe		5.00 µg/wipe

Minimum Total Reporting Limit: 5.0 µg/wipe. All internal QC parameters were met. Unusual sample conditions, if any, are described. Do not reproduce this report except in full. Concentration and *Reporting Limit (RL) based on areas provided by client. Values are reported to three significant figures. The test results apply to the sample as received. AIHA LAP, LLC accredited for Lead (Lab ID 100527).



Analysis Report

Schneider Laboratories Global, Inc

2512 W. Cary Street • Richmond, Virginia • 23220-5117
804-353-6778 • 800-785-LABS (5227) • Fax 804-359-1475**Customer:** ENVIRONMENTAL LEAD DETECTION (482)
Address: 436 Gardners Neck Rd
Swansea, MA 02777-3105**Order #:** 535877**Attn:**
Project: 323 Maple St
Location: Woonsocket RI
Number:**Matrix** Soil
Received 10/13/23
Analyzed 10/13/23
Reported 10/13/23**PO Number:** psalm128@comcast.net

Sample ID	Cust. Sample ID	Location	Sample Date	Weight			
Parameter		Method		Total µg	% / Wt.	Conc.	RL*
535877-001	01S	Side A 3 ft	10/11/23	1060 mg			
Lead		EPA 7000B		555 µg	0.0521 %	521 mg/kg	18.8 mg/kg
535877-002	02S	Side B 1 ft	10/11/23	1080 mg			
Lead		EPA 7000B		492 µg	0.0455 %	455 mg/kg	18.5 mg/kg
535877-003	03S	Side C 3 ft	10/11/23	1030 mg			
Lead		EPA 7000B		499 µg	0.0487 %	487 mg/kg	19.5 mg/kg
535877-004	04S	Mid Yard 16 ft	10/11/23	1020 mg			
Lead		EPA 7000B		153 µg	0.0150 %	150 mg/kg	9.80 mg/kg
535877-005	05S	Garage 3 ft	10/11/23	1090 mg			
Lead		EPA 7000B		339 µg	0.0310 %	310 mg/kg	9.16 mg/kg
535877-006	06S	Side Yard 20 ft	10/11/23	1040 mg			
Lead		EPA 7000B		157 µg	0.0151 %	151 mg/kg	9.62 mg/kg

Analyst: SA
535877-10/13/23 05:06 PM*Kelly Muncy*Reviewed By: **Kelly Muncy**
Manager**EPA Lead in Residential Soil**

Location	Level	Unit
Play Areas	400	mg/kg
Bare Soil Average	1200	mg/kg

Minimum reporting limit: 10.0 µg. EPA does not distinguish between lead-contaminated soil and soil-lead hazards. All internal QC parameters were met. Unusual sample conditions, if any, are described. Do not reproduce this report except in full. Values are reported to three significant figures. PPM = mg/kg | PPB = µg/kg. The test results apply to the sample as received. AIHA LAP, LLC accredited for Lead (Lab ID 100527).



Analysis Report

Schneider Laboratories Global, Inc

2512 W. Cary Street • Richmond, Virginia • 23220-5117
804-353-6778 • 800-785-LABS (5227) • Fax 804-359-1475

Customer: ENVIRONMENTAL LEAD DETECTION (482)
Address: 436 Gardners Neck Rd
Swansea, MA 02777-3105

Order #: 535876

Matrix Drinking Water
Received 10/13/23
Reported 10/17/23

Attn:

Project: 323 Maple St
Location: Woonsocket, RI
Number:

PO Number:

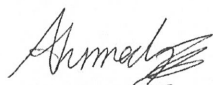
Sample ID	Cust. Sample ID	Location	Result	RL*	Units	Analysis Date	Analyst
Parameter		Method					

535876-001 01W Kitchen Sink

Metals Analysis

Lead EPA 200.9 Rev 2.2 <5.00 5.00 µg/L 10/14/23 AI

535876-10/17/23 10:13 AM


Reviewed By: **Ahmed Elnasseh**
Analyst

EPA Regulatory Limits

Parameter	Reg. Limit	Unit
Lead	15.0	µg/L

State Certifications

Method	Parameter	Rhode Island	Virginia
EPA 200.9 Rev 2.2	Lead	ELAP Certified	VELAP Certified

State	Certificate Number
Rhode Island	ELAP LAO00084
Virginia	VELAP 12299

All internal QC parameters were met. Unusual sample conditions, if any, are described. Surrogate Spike results designated with "D" indicate that the analyte was diluted out. "MI" indicates matrix interference. Concentration and *Reporting Limit (RL) based on areas provided by client. Values are reported to three significant figures. Solid PPM = mg/kg | PPB = µg/kg and Water PPM = mg/L | PPB = µg/L. The test results apply to the sample as received.