

## **LEAD INSPECTION REPORT**

WENT OF THE	Notice to Correct L	.cau nazaius i 🖺	- IN   INOUIC	e of Violation Y	∐ N ■
		Property	Information		
323 Maple St.			Single Family	Woonsocket 02	
	Street Address		Unit		City & Zip Code
1	10	1920	23-G	255-17	0
# Units	# Rooms	Year Built	Plat	Lot	# Children < 6 Years
Regulated Fac	cility: Y  N  Owner- 0	Occupied Dwelling I	Jnit: Y ■ N 🗌	Owner-Occupied	Premises: Y  N
		Property Ow	ner Informati	on	
Roger & Jacqu	eline Plante				
000 14 1 01		Nar	ne(s)	DI 00005	
323 Maple St.			Woonsocket,		
	Street Address			City, State, Z	ip Code
	Phone			Other Co	ntact
		Inspection	n Information		
Date of Initial	Inspection: 10/11/23		rehensive	Partial   Clea	rance
Date of Follov	v-up Inspection	Comp	orehensive	Partial   Clea	rance Renewal
Media Tested	(check all that apply):	Paint 🔳 Dust 🗉	Soil 🔳 Wat	er	
Reason for Ins	spection (check all that a	pply):			
☐ Departmen	nt of Health Initiated	Scho	ool or Child Care	Center	
HUD	The of Frodict Hillians		l Estate Transact		
=	nov				
Other Age	ricy		ate Chefit – Other	•	
		Inspection Com	npany Informa	ation	
Environmental	Lead Detection, Inc.	•	436 Gardners		
	Company Name		-	Street Add	dress
Swansea, MA (			(508) 674-8730		
	City, State, Zip Code	-	Pho	one	Other Contact
		Lead Inspec	tor Informatio	on	
John Eastman					
Print Name		Signature			
RIDOH License	e# LI0004	Expiration 1/31/2	2025		
				RIDOH Lic	ense #
Print Name of	Apprentice (if applicable)				
					La District

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.

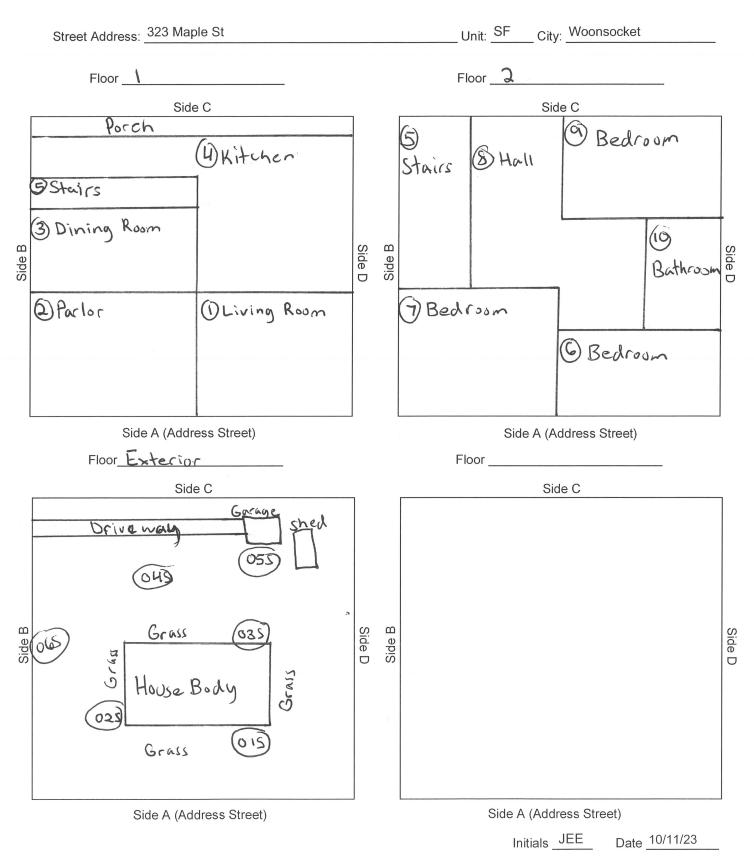
Regulated Facility means all residential rental units, all properties where a child younger than six years old lives or is expected to live in the next 12 months for 14 or more days per year, and all child care centers including preschools and kindergarten classrooms.

### 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 1<sup>st</sup> and March 31<sup>st</sup> must be corrected by the following June 30<sup>th</sup>.) 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 <u>all</u> environmental lead hazards within 30 days of receipt of the notice. (Exterior paint and soil hazards identified between November 1<sup>st</sup> and March 31<sup>st</sup> must be corrected by the following June 30<sup>th</sup>.) 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 <a href="mailto:doh.leadprogram@health.ri.gov">doh.leadprogram@health.ri.gov</a> 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 <a href="www.health.ri.gov/healthrisks/poisoning/lead">www.health.ri.gov/healthrisks/poisoning/lead</a>
- 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)





				REPORT I	KEY			
RF:	Neg	gative means	less than 1.0 r	$mg/cm^2$ or $78 =$	post-1978 pain	t	tive for pre-1978 pa	
est Kit:	Pos	sitive reaction	(pink or red) is	s " <b>+</b> "	Inconclusive	e (no reaction)	is "- "	
aint Chip ample:	Lea Cor (per	id-Safe means inditionally Le rcent by weigh	ad-Safe mear it) or 1.0 mg/cr	ss than 5,000 p is <b>INTACT</b> lead m <sup>2</sup> (by measure	d area)	eater than or e	equal to 5,000 ppm 5,000 ppm or 1.0 mç	g/cm²
aint ondition:	N=N	No Paint I	=Intact <b>D</b> =D	amaged <b>A</b> D	)=Assumed Da	maged <b>B</b> =Bi	nding or Friction	
ead:	F=L	ead-Free	S= Lead-Sat	e <b>C</b> =Condition	onally Lead-Sat	e <b>H</b> =Lead-H	azard	
emedy:	CO	<b>V</b> =Covered	MI=Made Int	act <b>REM</b> =	Removed <b>REF</b>	P=Replaced		
andard Type		one): Ma	nufacturer Reading 1	NIST Reading 2	Other (specify)  Reading 3	Average	Tolerance	
(mg/cr		of Test	Reading 1			(mg/cm <sup>2</sup> )	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	
								7
	, "							

Initials \_\_JEE

Street Address: 323 Maple St

# INTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978) page 5 of 22

\_\_\_\_\_Unit: SF City: Woonsocket

Room #: / Description: Civn, Rwm Side Pb Condition Lead Remedy Pb Condition Surface Surface Side Lead Remedy Ceiling Window Sill 0.4 AII COV Crown Molding Window Apron 0.0 OD Wall Window Casing 00 0.0 Wall Window Jamb 0.7 20 Wall Interior Stop 0.6 0.0 Wall Interior Sash 0.0 Chair Rail Window Well X AP Baseboard 0-1 Window Track Radiator Exterior Sash Floor **Exterior Stop** AP C COU Window Sill Door 0.0 A  $\times$ **Door Casing** Window Apron 00 Door Jamb Window Casing 0.0 X Threshold Window Jamb 00 × Door Interior Stop  $\mathcal{B}$ X Door Casing Interior Sash 0.0 X Door Jamb Window Well 0.6 Threshold Window Track X Door **Exterior Sash**  $\times$ Door Casing Exterior Stop 0.0 × Door Jamb Window Sill 2.6 × Threshold Window Apron Door Window Casing Window Jamb **Door Casing** × Door Jamb Interior Stop Threshold Interior Sash × Closet Door Window Well × Casing Window Track × Closet Jamb **Exterior Sash** × Closet Ceiling Exterior Stop × Closet Wall Closet Shelf Shelf Support Closet Pole CI Baseboard Closet Floor

\* Storm windows

Initials JEE Date 10/11/23

XRF: Positive ≥ 1.0 mg/cm<sup>2</sup>, Test Kit "+", or "AP" = Assumed Positive; Negative < 1.0 mg/cm<sup>2</sup> or "78" = Post-1978

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

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

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

Street Address: 323 Maple St

# INTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978) page 6 of 22

Unit: SF City: Woonsocket

Ro	om #: _	<u>~</u> D	escription:	Pa/	OV						
Surface	Side	Pb	Condition	Lead	Remedy	Surface	Side	Pb	Condition	Lead	Remedy
Ceiling		COS	/	C		Window Sill	AII	0.1			
Crown Molding	AII	0.0				Window Apron	1	00			
Wall	A	00				Window Casing		00			
Wall	B	0.2				Window Jamb		02			
Wall	C	0.0				Interior Stop		00			
Wall	D	0.(				Interior Sash			N	F	
Chair Rail	×					Window Well		AP	AD	H	
Baseboard	All	0.0				Window Track		· W	1/		
Radiator	×					Exterior Sash			N	F	
Floor		cw	/	C		Exterior Stop	d	AP	AD	H	
Door	AIL					Window Sill	×	10			
Door Casing	1	00	6			Window Apron	×				
Door Jamb	V	04				Window Casing	×				
Threshold	N.					Window Jamb	×				
Door	<b>×</b>					Interior Stop	X				
Door Casing	×					Interior Sash	×				
Door Jamb	×					Window Well	×				
Threshold	×					Window Track	X				
Door	×		9			Exterior Sash	×				
Door Casing	X					Exterior Stop	×				
Door Jamb	×					Window Sill	×				
Threshold	×					Window Apron					
Door	×					Window Casing	X				
Door Casing	X					Window Jamb	X				
Door Jamb	×					Interior Stop	X				
Threshold	×					Interior Sash	×				
Closet Door	×					Window Well	X				
Closet Casing	×					Window Track	X				
Closet Jamb	×					Exterior Sash	X				
Closet Ceiling	Τ.					Exterior Stop	X				
Closet Wall	$\times$										
Closet Shelf	X										
Shelf Support	X										
Closet Pole	3										
CI Baseboard	Κ,	5	9								
Closet Floor	X					-					
Condition: N = No Pa Lead: F = Lead-Free; Remedy: COV = Cov	aint; <b>I</b> = Ir ; <b>S</b> = Lead rered; <b>MI</b> :	ntact; <b>D</b> = d-Safe; <b>C</b> : = Made In	Damaged; <b>AD</b> = Conditionally itact; <b>REM</b> = Re	= Assumed Lead-Safe	Damaged; <b>B</b> = (Positive/Intact	t); <b>H</b> = Lead-Hazard (Po					
+ Storn	n u	1. ho	You					Ir	nitials JEE	Date 10	/11/23

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# INTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978) page \_\_\_\_\_ of \_\_\_\_\_ of \_\_\_\_\_\_ of

F. MENT OF THE	Street Add	ress: 2	323 Maple	St			- 12-12	Uni	t: SF	City: _\	Noonsocke	et
			escription:		y Pa	wm						
Curfoss	Cida	Dh	Condition	Lood	Damadu	C	urfo o o	Cida	Dh	Condition	Lood	Domod

Surface	Side	Pb	Condition	Lead	Remedy	Surface	Side	Pb	Condition	Lead	Remedy
Ceiling		car	/	<i>C</i>		Window Sill	B	0.0			11
Crown Molding	All	00				Window Apron	1	0.1			
Wall	A	001				Window Casing		0.0			N .
Wall	B	00				Window Jamb		cw	1	C	
Wall	C	0.0				Interior Stop		01			
Wall	n	0.0				Interior Sash			N	F	
Chair Rail	×					Window Well *		AP	AD	Н	
Baseboard	All	0.0				Window Track			11	F	
Radiator	×					Exterior Sash			Ñ	F	
Floor		0-1				Exterior Stop	V	AP	AD	H	
Door	A			V		Window Sill	×		, , , ,	- / /	
Door Casing	1	00	9 -			Window Apron	X				
Door Jamb		0.2				Window Casing	×				
Threshold	1					Window Jamb	×				
Door	10	0.2				Interior Stop	×				
Door Casing	1	00				Interior Sash	X				
Door Jamb		2.7	DIB	H		Window Well	X				
Threshold	1	0.0	~/>			Window Track	×				
Door	*					Exterior Sash	X	100			
Door Casing	×					Exterior Stop	X				
Door Jamb	X					Window Sill	×				
Threshold	×					Window Apron	×				
Door	×					Window Casing	X				
Door Casing	X					Window Jamb	X				
Door Jamb	×					Interior Stop	X				
Threshold	X					Interior Sash	X				
Closet Door	×					Window Well	×		,		
Closet Casing	X					Window Track	×		7		
Closet Jamb	×					Exterior Sash	X			9.	
Closet Ceiling	×					Exterior Stop	X				
Closet Wall	×										
Closet Shelf	×										
Shelf Support	×										
Closet Pole	X										
CI Baseboard	X										
Closet Floor	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

JU 5	dorm	Windo	W5
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	DEIS	41.
e	41	_0
EP	25	F
The	9 1	4

# INTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978)

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

page <u></u> 8 of <u>22</u>

	Roor	m#:_ <del></del>	Descrip	tion (che	ck one): 🔀	Kitchen Pantry	Bathro	oom			
Surface	Side	XRF	Condition	Lead	Remedy	Surface	Side	XRF	Condition	Lead	Reme
Ceiling		0.0				Window Sill X 2	C	00			
Crown Molding	~	0.0				Window Apron	Ĭ				
Wall	A	00				Window Casing		0-1			
Wall	B	00				Window Jamb	+	COV	1	C	
Wall	C					Interior Stop	+	00	/		
Wall	0	0.0				Interior Sash	+	00	R/	_	
Chair Rail	ŠΙΙ	00				Window Well			1	1	
Baseboard	X	1				Window Track					
Radiator	7					Exterior Sash					
Floor	- 1	ca	,	<i>C</i>		Exterior Stop			4	4	-
Door	1	200				Window Sill X 2	n	(1)	u	4	
Door Casing	1	00				Window Apron	1	0.0			
Door Jamb		2.3	D	H		Window Casing		00			
Threshold	0	0.0	D	[*		Window Jamb		ca	/	C	
Door		0.0				Interior Stop		0.1			
Door Casing	A2	- 4 16 19		^		Interior Sash		0-1	1/		
Door Jamb		0.0	DB	A		Window Well		AP	10	11	
Threshold		2.6	שוש	TI		Window Track		AF	11	N	
Door	BI					Exterior Sash			1/1	7	
Door Casing	101	0.0				Exterior Stop		AP	10	H	
Door Jamb		0.0	O	11		-	-	Po	70	, []	
Threshold	. /	2.9	D	H		Upper Cab Door	AII	00	76 /8		
Door	32	0.0				Upper Cab Frame					
Door Casing	32	M				Upper Cab Wall					
Door Jamb		00		11		Upper Cab Shelf					
Threshold		2.2		H		Shelf Support	4 11	D.	7 >-	)	
Closet Door	4	115				Lower Cab Door	AIL	10	18		
Closet Casing	H	00				Lower Cab Frame	+				
Closet Jamb		2.	n	/1		Lower Cab Wall	-	7			
Closet Ceiling		2.6	D	H		Lower Cab Shelf	+-				
Closet Wall		7.8	D	41		Shelf Support	-				
Closet Shelf		6.6	AD	H		Cabinet Drawer	A				
Shelf Support		02	(n	/1							
Closet Pole		5.0	AD	A		,					
Cl Baseboard											
Closet Floor		ad i	,	C		3					
	0 mg/cr	CW Tost K	(it "+" or "AD"		ad Positivo: No	gative < 1.0 mg/cm <sup>2</sup> or "7	'8" = Doo	t_1078			
Condition: N = No	Paint; <b>I</b> ee; <b>S</b> = I	= Intact; <b>I</b> _ead-Safe	<b>D</b> = Damaged; e; <b>C</b> = Conditio	AD = Ass nally Lead	sumed Damage I-Safe (Positive	ed; <b>B</b> = Binding or Friction e/Intact); <b>H</b> = Lead-Hazard			))		
X Sdo	rm	Wi	ndows	7	,				nitials JEE	Date <sup>1</sup>	0/11/23

# DE ISLAND E ISLAND

Closet Shelf
Shelf Support
Closet Pole
Cl Baseboard
Closet Floor

Street Address: 323 Maple St

## INTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978)

Unit: SF City: Woonsocket

page <u>9</u> of <u>22</u>

ENT OF	Roor	m#: 4	Descrip	otion (che	ck one): 🔯	Kitchen Pantry	Bathro	om			
		CON			<i>/</i>						
Surface	Side	XRF	Condition	Lead	Remedy	Surface	Side	XRF	Condition	Lead	Remed
Ceiling	×					Window Sill	×				
Crown Molding	×					Window Apron	×				
Wall Cower	AII	00				Window Casing	×				
Wall	×			10 10 10		Window Jamb	X	1			
Wall	×					Interior Stop	X	6 10 10			
Wall	×				7	Interior Sash	X				
Chair Rail	×			-		Window Well	×				
Baseboard	X					Window Track	×				
Radiator	×	7 - 2 -				Exterior Sash	X				
Floor	×					Exterior Stop	×				
Door	B3	00				Window Sill	×				
Door Casing	1	00				Window Apron	×				
Door Jamb		30	D	41		Window Casing	×				
Threshold	N	1.7	7	2		Window Jamb	X				
Door	C	00	·			Interior Stop	×				
Door Casing	1	00				Interior Sash	×				
Door Jamb		00				Window Well	×				
Threshold	1		11	F		Window Track	×				
Door	X		/ 4	-		Exterior Sash	X				
Door Casing	X					Exterior Stop	×				
Door Jamb	×					Upper Cab Door	×				
Threshold	X					Upper Cab Frame	X				
Door						Upper Cab Wall	X				
Door Casing	X					Upper Cab Shelf					
Door Jamb	×					Shelf Support	×				
Threshold	X					Lower Cab Door	×				
Closet Door	X					Lower Cab Frame					
Closet Casing	X					Lower Cab Wall	×				
Closet Jamb	×					Lower Cab Shelf	X				
Closet Ceiling	×					Shelf Support	X				
Closet Wall	X			19		Cabinet Drawer	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

# INTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978) page 10 of 22

THE NT OF THE	Street	Address:	323 Map	ole St			Unit:	SF	City: Wo	onsoc	ket		
"ENT OF					one): 🗌 Ha	allway 🏻 Staircas	Ilway 🏿 Staircase (separate page required for each one)						
Surface	Side	Pb	Condition	Lead	Remedy	Surface	Side	Pb	Condition	Lead	Remedy		
Ceiling		0.0				Window Sill	X						
Crown Molding	ALI	0-0				Window Apron	X						
Wall	A	0.1				Window Casing	×						
Wall		00				Window Jamb	×						
Wall	B	00				Interior Stop	×						
Wall	D	0.2				Interior Sash	×						
Chair Rail	AII	0.0		ν,		Window Well	×			(0)	1		
Baseboard	Ali	2.8	/			Window Track	×						
Radiator	×	1	/			Exterior Sash	X						
Floor		COV	/	_		Exterior Stop	X						
Door	D	_	-			Window Sill	V						
Door Casing	1	1.0	D	Ы		Window Apron	1						
Door Jamb	11/	32	D	H		Window Casing	×						
Threshold	X	1		,		Window Jamb	X						
Door	×					Interior Stop	X						
Door Casing	X					Interior Sash	X						
Door Jamb	X					Window Well	×						
Threshold						Window Track	×						
Door	×					Exterior Sash	×						
Door Casing	X					Exterior Stop	×						
Door Jamb	×					Newel Post	111	3-6	b	Н			
Threshold	X			2		Railing Cap	211	2.5	b	71			
Door	×					Handrail	AII	00		7			
Door Casing	X					Baluster	×	100					
Door Jamb	×					Lower Rail	×						
Threshold	X					Stair Tread	11	cec	/				
Closet Door	D			7		Stair Riser	AIC	001	1	<u>C</u>			
Closet Casing		4-1	D	H		Stringer	All	2-4	b	#			
Closet Jamb	+/-	15-1	D	79		-	×	9-7	0	71			
Closet Ceiling	+	00				Floor Casing Floor Edge	X						
Closet Wall	+1	0.0					17	02					
Closet Shelf	+	0.0				Wall Casing		11					
Shelf Support	+	0.0				Cour Nolls	211						
Closet Pole		0.0											
Cl Baseboard	+						-						
Closet Floor	18	Call	1	$\subset$			-						
	0 malem	COV	+" or "AD" - ^		eitive: Nagativ	re < 1.0 mg/cm <sup>2</sup> or "78"	= Post 10	78					
Condition: N = No	o Paint; <b>I</b> = ree; <b>S</b> = Le	= Intact; <b>D</b> = ead-Safe; <b>C</b>	Damaged; AD = Conditionall	= Assume y Lead-Safe	d Damaged; <b>B</b> e (Positive/Intac	= Binding or Friction ct); <b>H</b> = Lead-Hazard (Po							

# INTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978) page 11 of 22

Surface	Side	Pb	Condition	Lead	Remedy	Surface	Side	Pb	Condition	Lead	Remed
eiling	- Cido	0.2	Condition	Loud	Ttomody	Window Sill	A	8-1	h	X1	Ttomoc
rown Molding	AII	00				Window Apron	7	8.9	7		
/all	A	00				Window Casing		7.8	/	<i>C</i>	
/all	B	CW	/	C		Window Jamb		3.2	/	C	
/all	C					Interior Stop		8.4	1		
/all	0	0.0				Interior Sash	+	0 - 4	X/	CF	
hair Rail	×	/				Window Well *		AP	AD	11	
aseboard	AII	59	AD	/)		Window Track		7-0	110	7	
adiator	×	001	70			Exterior Sash			X (	~	
oor		00				Exterior Stop	W.	AP	AD	11	
oor	C	7.9	D	17		Window Sill	×	717	190	73	
oor Casing	1	9.2	n	H		Window Apron	×				
oor Jamb	+	100	0	11		Window Casing	×				
nreshold	1	0.6		$\sim$		Window Jamb	$\hat{\times}$				
oor	0	6-1	nIn	11		Interior Stop	X				
oor Casing	17	0.0	0/13			Interior Sash	X				
oor Jamb	+	7.1	DB	4		Window Well	×				
nreshold		0-1		(1)		Window Track	×				
oor	×	0-1				Exterior Sash	$\stackrel{\sim}{\times}$				
oor Casing	X					Exterior Stop	×				
oor Jamb	X					Window Sill	X				
nreshold	×					Window Apron	X				
oor	×					Window Casing	×				
oor Casing	X					Window Jamb	X				
oor Jamb	X					Interior Stop	$\hat{\mathbf{x}}$				
nreshold	X					Interior Sash	$\stackrel{\frown}{\times}$				
oset Door	1	49	DIB	4)		Window Well	×				
loset Casing	1	9.8		<u></u>	9	Window Track	×				
loset Jamb	+/-	5.5	1	<u>C</u>		Exterior Sash	X				
loset Ceiling	11	0-1				Exterior Stop	X				
oset Wall	+	0-1									
oset Shelf	+	0-1									
nelf Support		0.0									
oset Pole		3-0	X/	F							
Baseboard		2.7	AD	Li							
oset Floor		0.1	170								
F: Positive ≥ 1.0 ndition: N = No F	Paint; I = In e; <b>S</b> = Lead	Test Kit "- tact; D = d-Safe; C	Damaged; <b>AD</b> = Conditionally	= Assumed Lead-Safe	Damaged; <b>B</b> = (Positive/Intact	<pre>c &lt; 1.0 mg/cm² or "78" = Elinding or Friction The Elead-Hazard (Post); H = Lead-Hazard (Post)</pre>					

# INTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978) page 12 of 22

FATMENT OF HET	Street Ac	ldress:	323 Maple	St			Un	it: SF	City: W	oonsock	cet
ENT OF			Description:		lron	1					
Surface	Side	Pb	Condition	Lead	Remedy	Surface	Side	Pb	Condition	Lead	Remedy
Ceiling		00				Window Sill	A	2.6	/	C	
Crown Molding	AII	00				Window Apron	1	100	/	-	
Wall	A	00				Window Casing		7-8	D	4	
Wall	B	00				Window Jamb		4-3	/	C	
Wall	C	0.0				Interior Stop		6.3	/	-	
Wall	0	cw	1	2		Interior Sash			11	+	
Chair Rail	×					Window Well		AP	AD	1/	
Baseboard	6	6.4	AD	14		Window Track			11	F	
Radiator	×	-	1.82	//		Exterior Sash			11	Þ	
Floor		00				Exterior Stop		AP	10	1.1	
Door	C	7.6	D	A		Window Sill	13	P	220 15	78	
Door Casing	T	100	/	2		Window Apron	1	10		10	
Door Jamb		9.5	DB	<i>H</i>		Window Casing					
Threshold	N	0.(	010			Window Jamb					
Door	×					Interior Stop					
Door Casing	X					Interior Sash					
Door Jamb	X					Window Well					
Threshold	X					Window Track					
Door	×					Exterior Sash					
Door Casing	X					Exterior Stop	V				
Door Jamb	X					Window Sill	×				
Threshold	X					Window Apron	×				
Door						Window Casing	×				
Door Casing	×					Window Jamb	×				
Door Jamb	×					Interior Stop	X		1		
Threshold	×					Interior Sash	2				
Closet Door	Ŕ					Window Well	~				
Closet Casing	X	-				Window Track	K				
Closet Jamb	X					Exterior Sash	X				
Closet Ceiling						Exterior Stop	×				
Closet Wall	X	+									
Closet Shelf	,	-					7				
Shelf Support	X	-									
Closet Pole		-									
Cl Baseboard	×										
Closet Floor	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 W	indans
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# INTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978)

page 13 of 22

	Street	Address:	323 Mar	ole St			Unit: _	SF	City: Wo	onsoc	ket
MENT OF					one): 💢 Ha	ıllway 🔲 Staircase	e (sepa	rate pa	nge required	l for eacl	n one)
Surface	Side	Pb	Condition	Lead	Remedy	Surface	Side	Pb	Condition	Lead	Remedy
Ceiling		0.0				Window Sill	C	5.9	/	<	
Crown Molding	A II	0-0				Window Apron	Ī	6.4	/	-	
Wall	A	3.3	/	<u>_</u>		Window Casing	+	6.8	n	N	
Wall	B	2.9	1	C		Window Jamb		2.2			
Wall	C	a. r	/	C		Interior Stop	+	5.4	1	0	
Wall	D	0.0				Interior Sash		7	N	F	
Chair Rail	AII	00				Window Well		AP	An	H	
Baseboard	AII	6.6	D	H		Window Track		1	AI	5	
Radiator	×		/	//		Exterior Sash			Kr	1	
Floor		SW	/	C	- 1	Exterior Stop		AP	An	LI	
Door	41	7.0	D	4		Window Sill	×	180	110	/7	
Door Casing	1	00		[7]		Window Apron	×				
Door Jamb		9.0	D	Al		Window Casing	×				
Threshold	1.1	02	<i>V</i>	/ 1		Window Jamb	×				
Door	Ã2	7.2	D	41		Interior Stop	×				
Door Casing	132	6.5	D	41		Interior Sash	×				
		5.8	1	<u> </u>		Window Well	×				
Door Jamb	d		/			Window Track	+ -				
Threshold	B	0-1				Exterior Sash	×				
Door Cooing	17	00				Exterior Stop					
Door Casing	+	00				Newel Post	X				
Door Jamb	1.	00				Railing Cap	$+\stackrel{\checkmark}{\times}$				
Threshold	CD	-1	/	C		Handrail					
Door	CD	5.1	1	6		Baluster	X				
Door Casing	+	10.0	n	11		Lower Rail	×				
Door Jamb	1	5.6		7		Stair Tread					
Threshold Closet Door	0	0.2				Stair Riser	12				
Closet Casing	B										
Closet Jamb	+	0.0				Stringer	×				
Closet Ceiling	+	0.0				Floor Casing	1				
Closet Wall	+	0.4				Floor Edge	1	11	7	01	
Closet Shelf	+	0.7				Wall Casing	SIL	1.1		- [-	
Shelf Support	+	( )				Cave Us!	+	0.0			3
Closet Pole	-	0.1	11	<i>j</i>		AHIC ACUSS	>	0.0			-
Cl Baseboard	+	12	/V	F			-				
Closet Floor	11,	1.5	MU	A							
	0 malom	2 Toet Kit	"+" or "AD" - /	Secured D	neitive: Magativ	e < 1.0 mg/cm <sup>2</sup> or "78" :	= Post 10	78			
Condition: N = No	o Paint; I =	= Intact; D =	Damaged; AD	) = Assume	d Damaged; B	= Binding or Friction					
Lead: F = Lead-Fi Remedy: COV = 0						ct); <b>H</b> = Lead-Hazard (Po I	sitive/Dar	maged)			
1 Stray			CONTRACTOR OF THE PARTY OF THE								1

Street Address: 323 Maple St

# INTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978) page 14 of 22

Unit: SF City: Woonsocket

Ro	oom #: _	<u>_</u> D	escription:	130	tra n	1	_				
Surface	Side	Pb	Condition	Lead	Remedy	Surface	Side	Pb	Condition	Lead	Remedy
Ceiling		0.0				Window Sill	6	0-0			
Crown Molding	All	0-1				Window Apron	1	0.1			
Wall	A	0.0				Window Casing		00			
Wall	13	1.0				Window Jamb		ca	1	C	
Wall	C	0.7				Interior Stop		0-0			
Wall	D	0.0				Interior Sash		040	1/	1	
Chair Rail	×	0.0				Window Well	\$	AP	An	1/	
Baseboard	AIL	00				Window Track		77	11	F	
Radiator	X					Exterior Sash			X/	F	
Floor		01				Exterior Stop		AP	An	T V	
Door	A	6.3	DB	4		Window Sill	×	, , ,	130	-17	7 7 7 7 7 7
Door Casing	17	0.3	PIS	174		Window Apron	×				
Door Jamb		83	DB	H		Window Casing	×				
Threshold	1	0.3	NIP	11		Window Jamb	×				
Door	D	00				Interior Stop	Ŷ				
Door Casing	1	00				Interior Sash	\(\frac{\lambda}{\lambda}\)				
Door Jamb	1,	00				Window Well	$\sim$				
Threshold	× ×	00				Window Track	×				
Door						Exterior Sash	X				
Door Casing	×					Exterior Stop	3				
Door Jamb	×					Window Sill	×				
Threshold						Window Apron					
Door	$\sim$					Window Casing	X				
Door Casing	×					Window Jamb	>				
Door Jamb	X					Interior Stop	$\hat{\times}$				
Threshold						Interior Sash					
Closet Door	n	co				Window Well	× ×			×	
Closet Door Casing						Window Track	X				
Closet Jamb		0.1				Exterior Sash	X				
Closet Ceiling	-	CW	)	/		Exterior Stop	×				
Closet Wall	+/-	CON		_			X				
Closet Shelf	+-		λ/	C							
Shelf Support	+		/\/	7							
Closet Pole	+		X	<i>T</i>							
Cl Baseboard	+		_/V	<i>F</i>							
Closet Floor	<del>                                     </del>	Cal	, ,	C							
	ma/cm <sup>2</sup>	Test Kit "-			sitive: Negative	< 1.0 mg/cm <sup>2</sup> or "78"	= Post-1	 978			
Condition: N = No Pa Lead: F = Lead-Free; Remedy: COV = Cov	aint; I = Ir ; S = Lead vered; MI	ntact; <b>D</b> = d-Safe; <b>C</b> : = Made In	Damaged; <b>AD</b> = Conditionally tact; <b>REM</b> = R	= Assumed Lead-Safe emoved; <b>Ri</b>	Damaged; <b>B</b> = (Positive/Intac	= Binding or Friction t); <b>H</b> = Lead-Hazard (Po					
* 54	orm	W	indon.	3				Ir	itials JEE	10 Date_	/11/23



Street Address: 323 Maple St

# INTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978) page 15 of 22

Initials JEE Date 10/11/23

\_\_\_\_\_ Unit: SF City: Woonsocket

	Roor	m#: <u>/                                   </u>	Descrip	tion (che	ck one):	Kitchen 🗌 Pantry 💢	Bathro	om			
Surface	Side	XRF	Condition	Lead	Remedy	Surface	Side	XRF	Condition	Lead	Remed
Ceiling	0.00	0.0	- Comunication		T tomouy	Window Sill	1				1
Crown Molding	×	100				Window Apron	1				
Wall	1	cer	,	C		Window Casing	1	1			
Wall	B	00		0		Window Jamb	+	_			
Wall	0	(11)				Interior Stop					
Wall	h	cw	/	6		Interior Sash			11	F	
Chair Rail	×	1	/	_		Window Well		AP	An	41	
Baseboard	AII	0.1				Window Track		1	11	1	
Radiator	X					Exterior Sash			X	F	
Floor	, .	COV	1	<i>C</i>		Exterior Stop	9	AP	AD	41	
Door	B	0.0				Window Sill	×	10	100	- / /	
Door Casing	1	00				Window Apron	X				
Door Jamb	1	3.2	DB	N		Window Casing	<b>×</b>				
Threshold	K	0.0	W/0	14		Window Jamb	×				
Door	X					Interior Stop	X				
Door Casing	X					Interior Sash	X				
Door Jamb	X					Window Well	X				
Threshold	X					Window Track	X				
Door	X					Exterior Sash	X				
Door Casing	X					Exterior Stop	X				
Door Jamb	×					Upper Cab Door	×				
Threshold	×					Upper Cab Frame	×			1	
Door	×					Upper Cab Wall	×				
Door Casing	X					Upper Cab Shelf	X				
Door Jamb	X					Shelf Support	X			5"12" 11	
Threshold	×			111		Lower Cab Door	A	Po	1 /5	73	
Closet Door	×					Lower Cab Frame	1		1		
Closet Casing	X					Lower Cab Wall					
Closet Jamb	X					Lower Cab Shelf					
Closet Ceiling	X					Shelf Support					
Closet Wall	X			11 12 12 12 12 12 12 12 12 12 12 12 12 1		Cabinet Drawer	1			11 11	
Closet Shelf	X										
Shelf Support	X										
Closet Pole	X										
CI Baseboard	×										
Closet Floor	X										
Condition: N = No	o Paint; <b>I</b> ree; <b>S</b> = I	= Intact; Lead-Safe	<b>D</b> = Damaged e; <b>C</b> = Condition	; <b>AD</b> = Ass nally Lead	sumed Damage I-Safe (Positive	gative < 1.0 mg/cm² or " ed; B = Binding or Friction e/Intact); H = Lead-Hazard			)		

\* Storm Windows

## EXTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978)

page 16 of 22

Street Address: 323 Maple St	City: Woonsocket	Unit: SF
Porch: Enclorel	(separate	page required for each porch)

Surface	Side	Pb	Condition	Lead	Remedy	Surface	Side	Pb	Condition	Lead	Remedy
Siding	AII	ca/	(	C		Window Sill	A	cu	- /	C	
Corner Board	×	/				Window Casing	1	COU	/	C	
Upper Trim	×	_				Window Sash			N	E	
Ceiling		car	/	_		Window Sill	Ban	0.1	, ,		
Joist	X	/				Window Casing	1	00			
Column	AII	00				Window Sash	1		N	F	
Lower Wall	Ail	4-2	AD	A		Window Sill	×		•		
Floor		au		C		Window Casing	X				
Storm Door	A		X	F		Window Sash	X,				
Door		0-2				Window Sill	X				
Door Casing		0.4				Window Casing	X				
Door Jamb		00				Window Sash	X				
Threshold			Ň	F		Shutter	X				
Kick Plate	V	4.5	/	<i>C</i>							
Storm Door	C		X	F							
Door	1	_									
Door Casing											
Door Jamb		0.0									
Threshold	1/_	00									
Kick Plate	X	/									
Handrail	X										
Newel Post	×				7-1-1						s
Railing Cap	X										
Baluster	×										
Lower Rail	×										
Tread	X										
Riser	X										
Stringer	X										
Lattice	X										
Lower Trim	X										
											9

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

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# EXTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978) page 17 of 22

ALTE	Street Address: 323 Maple St	City: Woonsocket	Unit: SF	
	Porch: Side A Frent	(separate	page required for each porch)	

Surface	Side	Pb	Condition	Lead	Remedy	Surface	Side	Pb	Condition	Lead	Remedy
Siding	C	ca	1	C		Window Sill	All	a		C	
Corner Board	×					Window Casing	11	car	/	C	
Upper Trim	All	cw	1	<i>C</i>		Window Sash		cu	/	C	
Ceiling		1.8	/	C		Window Sill	~				
Joist	All	6.1	//	(		Window Casing	$\times$				
Column	All	2.5	1	0		Window Sash	X				
Lower Wall	X	_				Window Sill	X				
Floor		00				Window Casing	×				
Storm Door	C		X	F		Window Sash	$\times$				
Door	1	0.0				Window Sill	×				
Door Casing		1.8	D	4		Window Casing	X				
Door Jamb		0.0				Window Sash	X				
Threshold			N	F		Shutter	211		N	F	
Kick Plate	V	6.0	0	4							
Storm Door	×										
Door	X										
Door Casing	X										
Door Jamb	X										
Threshold	×										
Kick Plate	X										
Handrail	×										
Newel Post	X		N- 1,								
Railing Cap		00	1								
Baluster		0-2									
Lower Rail		00									
Tread	×	/									
Riser	×	/									
Stringer	×					-					
Lattice	AII		N	F							
Lower Trim	All	00	•						B-		
	, ,										
	111111111111111111111111111111111111111										

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

# EXTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978) page 18 of 22

A MENT OF THE	Street	Addres	s: 323 Ma	aple St		Uni	t: SF	City:	Woonso	cket	
ENT OF			ture: Hous								
Surface	Side	Pb	Condition	Lead	Pomody	Surface	Side	Pb	Condition	Load	Pomody
	AI	-	Condition	Lead	Remedy		Alı		Condition	Lead	Remedy
Siding	711	Car	/			Window Sill	411	CCV	-/-	C	
Corner Board	011	0.0	,			Window Casing		cas	/-	C	-
Upper Trim	All	a	/	_		Window Sash	0	ca			
Lower Trim	C	0,6	A (	-		Window Sill	X				
Storm Door			M	F		Window Casing	X				
Door Myse						Window Sash	X				
Door Casing						Window Sill	×				
Door Jamb	-	00	11		-	Window Casing	×	-			
Threshold			N	7		Window Sash	X				
Door Kickplate	a		Ą	+		Window Sill	X				
Storm Door	X	4				Window Casing	X				
Door Cone	C	00				Window Sash	X		- 1. (	-	
Door Casing		ca		<u>C</u>		Window Shutter	BIL			F	
Door Jamb	Y	6.8	D	H		Fire Escape	X				
Threshold	06					BA Window Sill	B	0.2			
Door Kickplate	$\times$					BA Window Sash		au		C	
Storm Door	X					BA Window Frame		0-1			
Door	$\times$					BA Screen Frame	N		N	F	
Door Casing	$\prec$					BA Window Sill	01	00			
Door Jamb	X					BA Window Sash	1	a	(	C	
Threshold	$\times$					BA Window Frame		a			
Door Kickplate	X					BA Screen Frame	d		//	F	
Overhang	×					BA Window Sill	02	00			
Column	×					BA Window Sash	1	6.0	D	4)	
Newel Post	C		11	F		BA Window Frame	1	5.5	0	H	
Railing Cap	Č		11	F		BA Screen Frame	è X	_			
Baluster	C		1/	F		BA Window Sill	X				
Lower Rail	-		N	F		BA Window Sash	X				
Handrail *		1.1	n	4		BA Window Frame	X				
Tread	C	, - ,	1/	F		BA Screen Frame	×				
Riser	0		X/	5		Foundation	111		X/	F	
Stringer	C		/Y	E		Bulkhead	$\times$		-γ		
Lattice	×		//\	/		Drain Pipe	×				
Flav	<u></u>	5.8	7)	H		Electrical Conduit	2				
P. n. XX	0	0.0	V				2				
MA		0.0				Lamp Post	AII		11	17	
XRF: Positive > 1.0	) mg/cm².	Test Kit	"+". or "AP" =	Assumed P	ositive: <b>Negative</b>	Fence < 1.0 mg/cm² or "78" = F	ost-197	<u>l</u> B	/ (/		27-10-1 Root (8-10-10-10-10-10-10-10-10-10-10-10-10-10-
Condition: N = No	Paint; I = I	Intact; <b>D</b> =	Damaged; A	D = Assume	ed Damaged; B =	Binding or Friction					
Remedy: COV = Co						t); <b>H</b> = Lead-Hazard (Posit	iive/Dam	ageu)			
								1	JFF	D-4- 10/1	11/23
× Ma	D	Fen	CK					Init	ials <u>JEE</u>	Date	

# DEPART DE ISLAND

## **EXTERIOR PAINT INSPECTION (REQUIRED IF BUILT PRE-1978)**

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FATTALENT OF HE	Street Ad	ddress:	323 Mapl	e St	City:	Woonsocket			Unit: SF		
	Accesso	ry Struc	cture: _G	erpe		Accessory S	Structure	e:	Sheel		
Surface	Side	Pb	Condition	Lead	Remedy	Surface	Side	Pb	Condition	Lead	Remedy
Siding	AII		1/	F		Siding	All		N	F	
Corner Board	×		, v	,		Corner Board	×			/	
Upper Trim	ALL	3.1	n	41		Upper Trim	All		//	F	
Lower Trim	×					Lower Trim	×		- 0		
Door & 3	B	0.7				Door	B		1/	F	
Door Casing	1	0-6				Door Casing	X	/	*		
Door Jamb		24				Door Jamb	~	_			
Threshold			N	P		Threshold	Y	_			
Door	A	4.5	1	C		Door	×				
Door Casing	1	1.1	D	H		Door Casing	$\times$				
Door Jamb		45	0	14		Door Jamb	×				
Threshold		7-0	11	F		Threshold	×				
Window Sill	×		70	•		Window Sill	×				
Window Casing	×					Window Casing	×				
Window Sash	X					Window Sash	×				
Window Sill						Window Sill	×				
Window Casing	×					Window Casing	×				
Window Sash	X					Window Sash	×				
Foundation	7					Foundation	X				
Touridation						Touridation					
											,
						-					
XRF: Positive ≥ 1.	.0 mg/cm <sup>2</sup> ,	Test Kit	"+", or " <b>AP</b> " = = Damaged: <b>△</b>	Assumed F	Positive; <b>Negat</b> ed Damaged:	tive < 1.0 mg/cm <sup>2</sup> or "78" B = Binding or Friction	' = Post-1	978			
Lead: F = Lead-Fre	ee; S = Lea	ad-Safe; (	C = Conditiona	lly Lead-Sa	fe (Positive/In	tact); <b>H</b> = Lead-Hazard (P	ositive/Da	amaged)			
Remedy: COV = C	Covered; MI	I = Made	Intact; REM =	Removed;	REP = Replac	ed					
				,				J	EE Data 10	0/11/23	



## **DUST INSPECTION**

Street Address:	323 Maple St.	Unit:	S.F	City: Woonsocket
Sampling Date:	10/11/23 Analyzing Laboratory or ELPAT Accred	litation:	Schnei	der 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	Н
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	Н
08D	Rm 9 / C	Window Sill	4 1/2 x 26 3/4	37.30	Н
09D		Blank		< 5.00	
			* * * * * * * * * * * * * * * * * * *		

KEY: F = Lead-Free S = Lead-Safe H = Lead-Hazard
\*minimum 16 square inches; maximum 2 square feet

Comments:	
	,



## **SOIL INSPECTION**

	323 Maple					Schneider Lebere	
Sampling	Date: 10/11/23 Ar	nalyzing	Laboratory o	r ELPAT A	ccreditation	n: Schneider Labora	tories Global, Inc
	If so	il sampling	g was not perfori	med, check al	Il reasons that	apply:	
Covered b	y Ice/Snow 🔲 Co	vered by	/ Debris	Other (	specify) _	1	
			1				
Sample #	Structure/Area	Side	Distance (ft. or in)	Depth (ft. or in)	Bare (Y or N)	Result (ppm)	Lead
01S	Primary	Α	3 ft.	1 in.	Υ	521	Н
02S	Primary	В	1 ft.	1 in.	Υ	455	Н
03S	Primary	С	3 ft.	1 in.	Υ	487	Н
	Primary	D			N		С
	Play Area						
04S	Mid Yard	С	16 ft.	1 in.	Υ	150	S
05S	Garage	Α	3 ft.	1 in.	Υ	310	S
	Shed						
	Fence						
	Play Equipment						
	Outdoor Furniture			1			
06S	Other	В	20 ft.	1 in.	Υ	151	S
1							
	- 1						
KEY: F=	Lead-Free S = Lea	ad-Safe	C = Cond	itionally L	ead-Safe (	covered) H = Lead-l	Hazard
	Indicate loc	ation(s)	of soil same	ole collecti	ion on For	m PBLC-23-3	

Comments: Sample	06S was taken i	n the B side o	of the yard.	



# WATER INSPECTION

	Street Addr	ess: 323 Maple St.		_ Unit: <u>S.F</u> City	: Woonsoo	ket
	Sampling D	Date: 10/11/23 Analyzing	Laboratory: Sch	neider Laboratories	s Global, Ind	<u> </u>
Vater So	urce: Public	Water Supplier: City of Woonsoo	cket	Private W	ell 🔲 Unkno	own 🔲
Check all	l that apply):	Lead Service Line ☐ Lead Pipe	/ Gooseneck 🔲 i	Non-Lead Service L	ine 🔲 Unkr	nown 🗸
	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
		ample: Has it been at least 6 hours si mple: Collected after one minute or ur				
DOH RI	ECOMMENI	DED ACTIONS (Check all that app	olv):			
		er for drinking and cooking.	51 <b>y</b> ).			
		vater without flushing until tempera	ature drops.			
Do no	t consume v	vater until lead level(s) <15 ppb is	achieved.			
Owne	r must provi	de bottled water for cooking and d	rinking until RIDO	OH approves additio	nal lead sar	npling results
Owne	r must label	all taps "Lead Warning: Do not us	e for drinking or o	cooking".		
Filtrati	ion systems	must be maintained and filters rep	olaced per manuf	acturer's instructions	S.	
Other	(specify)					
ommen	ts:					
	15.					
				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 Received Analyzed

Reported

Wipe 10/13/23 10/14/23

10/16/23

Location

323 Maple St Woonsocket, RI

Number

Project

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

### **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

535877

Soil

10/13/23

10/13/23

10/13/23

Order #:

Analyzed

Reported

**Customer: ENVIRONMENTAL LEAD DETECTION (482)** 

Address: 436 Gardners Neck Rd

Swansea, MA 02777-3105

Matrix Received

Attn: Project: 323 Maple St

Location: Woonsocket RI Number PO Number:

Number:				PO Nui	mber:	psalm128@co	mcast.net
Sample ID Parameter	Cust. Sample ID	Location Method	Sample Date	Weight 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

**EPA Lead in Residential Soil** 

Location Level Unit 400 Play Areas mg/kg

Bare Soil Average 1200 mg/kg Kelly Muney

Reviewed By: Kelly Muncy Manager



### **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 Reported 10/13/23 10/17/23

Attn: Project:

323 Maple St

Location:

Woonsocket, RI

Number:

PO Number:

Sample ID	Cust. Sample ID	Location					
Parameter		Method	Result	RL*	Units	<b>Analysis Date</b>	Analyst
535876-001	01W	Kitchen Sink					
Metals An	nalysis						
Lead		EPA 200.9 Rev 2.2	<5.00	5.00	μg/L	10/14/23	Al
535876-10/17/	/23 10:13 AM				1	1 -	
					Ahm	alge	

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		