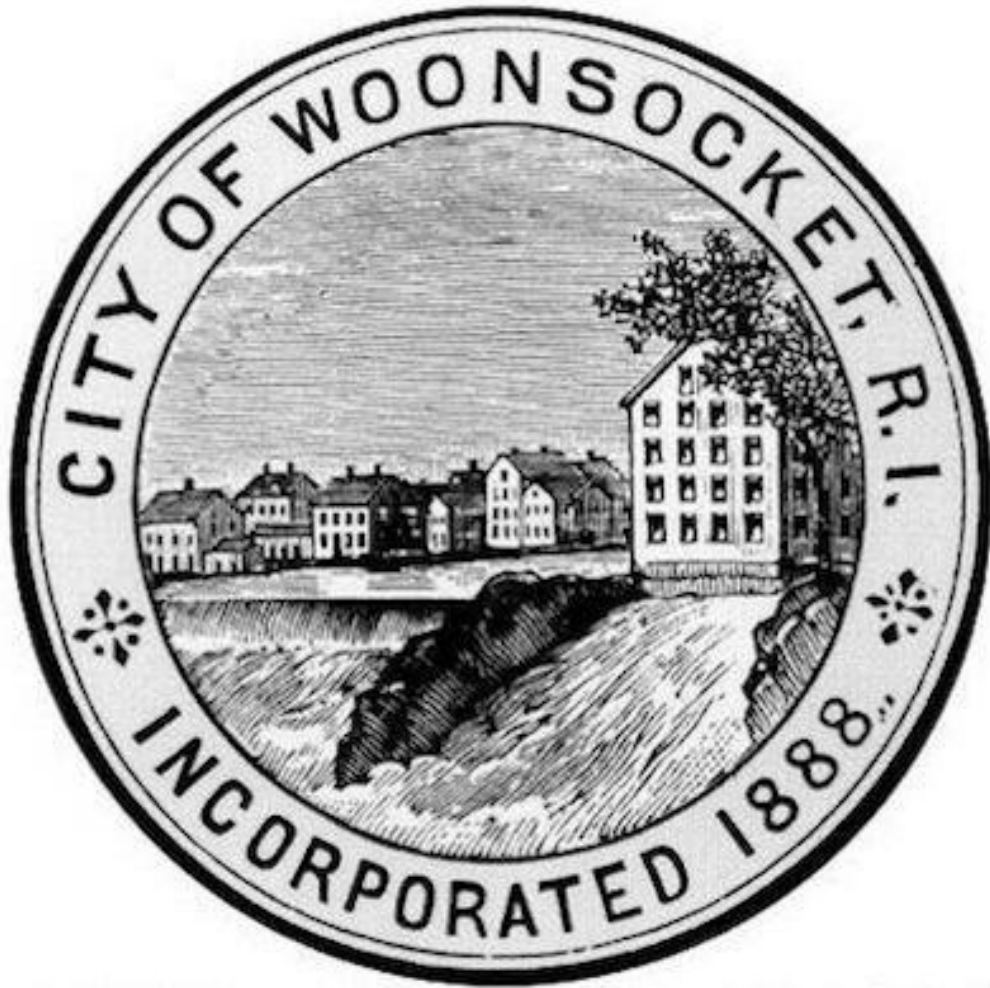


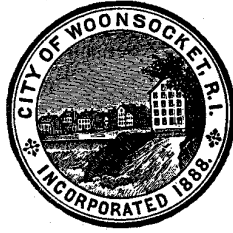
# of Woonsocket



**Lead Hazard Reduction  
1 Transit St.**

**BID No. 6222**

*Prepared By:  
City of Woonsocket  
Department of Planning & Development  
March 2024*



**CITY OF WOONSOCKET, RHODE ISLAND  
INVITATION TO BID FOR:**

**“Lead Hazard Reduction – 1 Transit St. ”  
BID No. 6222**

**For Planning & Development**

City of Woonsocket is accepting bid proposals for the above-referenced project.

**Bid Opening:** Bids must be received by Woonsocket City Hall, Office of Purchasing, 169 Main Street, Woonsocket, RI 02895 prior to the bid opening date and time. On time bids will be publicly opened and read aloud in Harris Hall, located on the 3<sup>rd</sup> floor of Woonsocket City Hall, promptly starting at **2:00 p.m. on Friday, March 29, 2024**. Bids received after this deadline will not be accepted and will be returned unopened to the sender.

**Bid Submissions:** All bids must be submitted in duplicate, placed in a sealed envelope and identified with The following information: **“Lead Hazard Reduction – 1 Transit St., Bid No. 6222” and the name of The company that is submitting the proposal.**

Bids must be prepared electronically, if available, or using the provided bid forms. All written bid forms must be typed or legibly printed, then signed and dated in blue or black ink.

**Project Components:** the work shall include, but not be limited to: Lead hazard reduction of any damaged areas which has been designated by the Lead Inspector in the U.S. Department of Housing and Urban Development (HUD) regulated Comprehensive Environmental Lead Inspection (CELI).

**Project Timeline:** The project must commence within ten (10) business days of the award notification date.

**Pre-Bidding Event:** A **Mandatory site visit walk through** will be held on Wednesday, March 20, 2024 @ 11:30 a.m. at 1 Transit St., Woonsocket, RI 02895.

**Bid:** In conformance with the terms and conditions of these specifications including the Invitation to Bid and other documentary forms therewith, the Bidder hereby proposes, offers and agrees if this bid be accepted within sixty (60) calendar days from the date of bid opening to do all things necessary to fully perform and satisfy all terms, conditions and requirements of the subject specifications.

**Withdrawal of Bids:** No bidder may withdraw their bid within sixty (60) days after the actual time and date of the bid opening thereof.

**Rejection of Bids:** The City reserves the right to cancel this ITB, award on the basis of cost alone, accept or reject any or all bids, in whole or in part. The City further reserves the right to waive as an informality any irregularities contained in any bid not affecting substantial rights that may be in the City's best interest. Proposals found to be technically or substantially nonresponsive at any point in the review process will be rejected and not considered further. Any such decision will be considered final.

**Bid Award:** Upon selection of a winning contractor, the City of Woonsocket will send a bid award notice to the awardee. The bid award notice will identify a point of contact from the City who will assist the awardee in completing any pre-work requirements. Upon satisfactory meeting all of the obligations of the pre-wok requirements, the City of Woonsocket will issue a "Notice to Proceed" for work to commence.

Individuals requesting interpreter services for the hearing impaired should call the Finance Director at 401-762-6400 seventy-two (72) hours in advance of the bid opening deadline.

Thank you for your consideration of this invitation to bid and your participation in this bid process.

Published: March 12, 2024

**X**

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**Christine Coutu,  
Finance Director**

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## DEFINITIONS

- a. **CELI** – Comprehensive Environmental Lead Inspection
- b. **City:** Whenever in this contract the word “City” is used, it shall be understood to refer to the City of Woonsocket, in the State of Rhode Island.
- c. **Contractor:** Whenever in this contract the word “Contractor” is used, it shall be understood to refer to the Lead Hazard Contractor who is the party or parties of the second part of this contract, or the representative of said party or parties. The Contractor must be licensed to conduct lead hazard reduction work in regulated facilities.
- d. **Construction Specialist:** Whenever in this contract the word “Construction Specialist” is used, it shall refer to the Lead Hazard Construction Specialist for the City of Woonsocket.
- e. **Director:** Whenever in this contract the word “Director” is used, it shall be understood to refer to the Director of Planning & Development for the City of Woonsocket, acting either directly or indirectly through any authorized designee, assistant, consultant, or inspector having either general or immediate charge of the work, limited only by the limited duties entrusted to him.
- f. **Lead Hazard Program Manager:** Whenever in this contract the word “Lead Hazard Program Manager” is used, it shall be understood to refer to as the person responsible for the day-to-day operations of the City’s Lead Hazard Reduction Program in accordance with all City, State and Federal regulations.
- g. **Lead Inspector:** Whenever in this contract the word “Lead Inspector” is used, it shall be understood to refer to Certified Environmental Lead Inspectors who per RIDOH, can conduct Comprehensive Environmental Lead Inspections, Clearance Inspections, and Annual Re-inspections and can issue Certifications of Lead-Free or Lead-Safe Status after these inspections. They can conduct Clearance Inspections and issue Certifications of Acceptable Clearance Status to Lead Hazard Control Firms for compliance with the Renovation, Repair, and Painting Rule. They can also conduct Limited Environmental Lead Inspections to look for lead in paint, drinking water, interior dust, or exterior soil.
- h. **RIDOH:** Rhode Island Department of Health
- i. **Specifications:** Whenever in this contract the word “Specifications” is used it shall be understood to refer to the body of directions and all written or printed agreements and instructions pertaining to the method and manner of performing the work and/or to the quantities and qualities of the materials and work to be furnished under the Contract. The Invitation to Bidders, Proposals, General Conditions, Special Conditions, if any, and Technical Specifications are all a part of the “Specifications”.
- j. **WLHP:** Woonsocket Lead Hazard Program

**Nomenclature:** Whenever in the specifications or upon the plans the words directed, required, ordered, designated, prescribed, or words of similar meanings are used, it shall be understood that the words “by the Lead Construction Specialist” immediately following the word is intended. Similarly, the words approval, acceptable, satisfactory, or words of similar meaning shall mean approval by, acceptable to, or satisfactory to the Lead Hazard Program Manager, unless otherwise stated.

**INFORMATION TO BIDDERS**

**CITY OF WOONSOCKET**

**FINANCE DEPARTMENT**

**(401) 762-6400**

**1. RECEIPT AND OPENING OF PROPOSALS**

Sealed bids/proposals will be accepted, and time stamped upon receipt in the Finance Department, City of Woonsocket, 169 Main Street, Woonsocket, Rhode Island, 02895, until the time indicated on the attached Advertisement for Bids, for the commodities, equipment or services listed in the specifications. Bid/Proposals will be publicly read at the time specified in the advertisement.

**Timeline - the following timeline is subject to revision:**

|                             |         |
|-----------------------------|---------|
| RFP Issued                  | 3/12/24 |
| Walk Through                | 3/20/24 |
| Proposal submittal deadline | 3/29/24 |
| Public Opening              | 3/29/24 |
| Selection of firm           | 4/11/24 |

**2. FORM OF BID**

All contractors must use the bid sheet to submit their bids to the WLHP. A separate sheet with itemized expenses can be attached to the bid sheet but only for the purpose of explaining costs that have been listed on the bid sheet. Any item that is not in the bid sheet even if included on a separate sheet will not be considered by WLHP.

**3. SUBMISSION OF BIDS**

Envelopes containing bids must be sealed and addressed to the Finance Department, Office of Purchasing, City of Woonsocket, 169 Main St, Woonsocket, Rhode Island, 02895, and must be marked with the name and address of the bidder. Proposals received prior to the time of opening will be securely kept and unopened. No responsibility will be attached to an officer or person for the premature opening of a proposal not properly addressed and identified.

**4. RHODE ISLAND SALES TAX**

The City is exempt from the payment of the Rhode Island Sales Tax under the 1956 General Laws of the State of Rhode Island, 44-18-30, Paragraph 1, as amended.

**5. FEDERAL EXCISE TAXES**

The City is exempt from the payment of any excise tax or federal transportation taxes. The price of the bid must be exclusive of taxes and will be so constructed.

**6. ADDENDA AND INTERPRETATIONS**

No interpretation of the meaning of the specifications or other documents will be made to any bidder orally. Every request for such interpretation must be made in writing and addressed to the purchasing agent, City of Woonsocket, 169 Main Street, Woonsocket, Rhode Island 02895.

To be given consideration, all inquiries must be received by the date and time as noted in the solicitation. If no date is provided in the solicitation, the City will gather any inquiries received and will collectively respond to and publish those responses no later than seven (7) calendar days prior to the date of the bid opening.

Any and all such inquiries, corrections, interpretations, and any supplemental instructions will be in the form of written addenda. All addenda will be posted, at a minimum, on the City's website, in the "Bid Opportunities" section, beneath the specific corresponding solicitation. All addenda become part of the specification document from their effective dates.

It is the bidder's responsibility to check for and download any and all posted addenda up to the bid opening date and time.

Each bidder must ascertain, prior to submitting their Proposal that they have received all addenda issued and must acknowledge the receipt in their submitted Proposal.

No addendum will be posted later than two (2) calendar days prior to bid opening date except for an addendum, if necessary, postponing the opening date or the withdrawal of the solicitation.

Any written or oral instructions concerning a solicitation, unless supported by an addendum, regardless of the source of that information, is non-binding, should not be relied upon and is not considered part of the specification documents.

In the event there is a discrepancy between verbal communication and written communication, the written communication will govern.

## **7. DELIVERY**

All purchases related to this bid are to be delivered within the City of Woonsocket. Delivery is to be supplied with a Purchase Order. No extra charges for delivery, handling or other services will be honored. Only inside delivery and set-up, where required, will be accepted. TAILGATE DELIVERIES WILL BE REFUSED. The vendor must notify the City of Woonsocket 24 hours prior to delivery. All claims for damage in transit shall be the responsibility of the successful bidder. The City will not make payment on damaged goods, they must be replaced, or adjustments made at the option of the City. The City of Woonsocket is only represented by the Finance Director in these matters and said director shall be the only entity to negotiate any settlements. Deliveries must be made during normal working hours.

## **8. Bidder must comply with all State Labor Laws.**

## **9. The successful bidder must have all current taxes paid which are owed to the City of Woonsocket and State of Rhode Island.**



**CITY OF WOONSOCKET**

**RHODE ISLAND**

**FINANCE DEPARTMENT**

**PURCHASING DIVISION**

**THE OFFICER OF THIS COMPANY, HEREBY, CERTIFIES THAT THIS COMPANY IS IN GOOD STANDING WITH THE STATE OF RHODE ISLAND AND ALL THE REQUIRED RECORDS HAVE BEEN FILED WITH THE STATE.**

|                   |        |
|-------------------|--------|
| NAME:             |        |
| CORPORATION NAME: |        |
| BY:               | TITLE: |
| STREET ADDRESS:   |        |
| CITY:             | STATE: |
| WITNESS:          | DATE:  |

## **1. CHARACTER OF WORK AND PERSONNEL**

The work shall be executed in a careful and professional manner by properly trained and qualified workers or craftsmen in strict accordance with the plans and/or specifications. Contractor shall supply and maintain portable toilet units to accommodate the number of workers on the site. Contractors shall hire competent and qualified workers. All machine operators, if needed, must have a valid and current Rhode Island operator's license.

## **2. SITE INVESTIGATIONS**

Bidders must satisfy themselves through personal examinations of the location of the proposed work and to the accuracy of the information contained in the specifications and drawings. The submission of any bid shall be accepted by the City as satisfactory proof that the bidder is satisfied himself in this respect. He shall not, after the submission of this bid, assert that there was any misunderstanding regarding the nature or amount of work to be done.

## **3. EXECUTION, CORRELATION, AND INTENT OF DOCUMENTS**

The Contract Documents are complementary and what is called for by anyone shall be as binding as if called for by all. The intention of the document is to include all labor and materials, equipment, and transportation necessary for the proper execution of the work. All costs of material, equipment and labor supplied by the Contractor which is incidental to the acceptable completion of the project, shall be considered to have been included in the price or prices quoted and no separate payments will be made.

## **4. SPECIFICATIONS**

It shall be the responsibility of the Contractor to study the specifications and other instructions. He shall request clarification from the Lead Hazard Reduction Manager of any errors, inconsistencies or omissions which may be discovered.

## **5. USE OF PREMISES**

The Contractor shall confine all apparatus to the roadway or property in which the work is being performed and will not unreasonably encumber these premises with such apparatus, materials, supplies and equipment. The contractor shall promptly remove and dispose of all debris resulting from his operations. The contractor shall hold the City harmless from claims by abutting and adjacent property owners for damages resulting from his operation. The Contractor will be required to work during normal business hours (Mon/Fri, 8am.-5 pm.) unless approved in advance by the Lead Hazard Program Manager.

## **6. SUBCONTRACTORS**

The Contractor shall notify the City, in writing, of the names of all subcontractors together with a summary of the extent and character of the work to be done by each subcontractor. The Proposal shall include a blank form to be used for this purpose where such subcontractors have been selected by the bidder during the bidding period.

The City shall approve or disapprove subcontractors after the award of a general contract. The City shall be notified of any changes in subcontractors during progress of the project.

## **7. OBLIGATIONS AND LIABILITY OF CONTRACTOR**

The Contractor shall take responsibility for the work done under this contract, for the protection of all the work, and for preventing injuries and damage to property or utilities on or about the work. The Contractor shall bear all losses sustained by him or by the City because of the quality or character of the work, because

the nature of the land differs from that which was estimated or expected, or on account of the weather, conditions, or other causes. The Contractor shall assume the defense of all claims, regardless of Character against the contractor or the City. The contractor shall indemnify and hold harmless the City, its officers, or agents, against all claims for injuries to persons, corporations or property arising out of the work done under this contract; or groundless, false, or fraudulent claims or claims relating to labor, and materials furnished for the work.

#### **8. DIRECTION**

The Planning Department and/or Lead Hazard Program Manager/Construction Specialist shall confirm major directions, in writing, to the Contractor. Other directions, given verbally by the Lead Hazard Program Manager or Construction Specialist, shall be confirmed only upon request.

#### **9. CONTROL BY THE LEAD HAZARD CONSTRUCTION SPECIALIST**

The Construction Specialist and/or Lead Hazard Program Manager shall have general supervision and direction of the work. The Contractor shall abide by all orders, directions, and requirements, and shall perform all work to the satisfaction of the Director of Planning & Development.

The Construction Specialist and/or Lead Hazard Program Manager shall have the authority to reject all materials which do not conform to the contract; to approve the methods, manner and sequence of all work; to determine the amount, quality, acceptability, and fitness of all parts of the work; and shall interpret the plans, specifications and other contract documents, issue any extra work orders and give final approval to the complete work.

The Construction Specialist and/or Lead Hazard Program Manager shall decide upon all questions in connection with the work and shall within a reasonable time after presentation to him of such questions, make decision, in writing, relating to the execution and progress of the work or the interpretation of the contract documents.

The Construction Specialist and/or Lead Hazard Program Manager shall have the authority to make minor changes to the work, not involving extra cost, providing such changes are consistent with the purpose of the work. No extra work shall be authorized without a written order from the Engineer, except in an emergency that is endangering life or property. No claim for an addition to the contract sum shall be valid unless so ordered.

#### **10. COMMENCEMENT PROSECUTION AND COMPLETION**

The Contractor will be required to commence work under this contract within 7 days after signing the contract the time limit specified therein after the date of the notice to proceed, to prosecute the work with faithfulness and energy, and to complete the entire work under this contract by the limit stipulated. The completion time is 7 days after commencement of work and the completion time stipulated above shall include final cleanup of the premises.

#### **11. EMPLOYMENT OF RESIDENTS**

The Contractor shall employ residents of the City during the construction of the work under this contract whenever possible.

#### **12. NOTICE TO THE CITY OF LABOR DISPUTES**

The Contractor shall immediately notify the Construction Specialist and/or Lead Hazard Program Manager of any actual or potential labor disputes, whenever he has knowledge of such, which might delay timely performance of the contract work.

### **13. SEPARATE CONTRACTS**

The City reserves the right to let other contracts in connection with this work. The Contractor shall afford other contractors' reasonable opportunity for the introduction and storage of their materials and the execution of their work. He shall properly connect and coordinate his work with their work.

If any part of the Contractor's work depends upon the work of any other contractor for proper execution or results, the Contractor shall inspect and promptly report to the Construction Specialist and/or Lead Hazard Program Manager any defects in such work that cause it to be unsuitable for the proper execution or results. His failure to inspect or report such defects shall constitute an acceptance of the other contractor's work as fit and proper for the reception of his work, except as to defects which may develop in the other contractor's work after the execution of the Contractor's work.

### **14. THE CITY'S RIGHT TO DO WORK**

If the Contractor should neglect to prosecute the work properly or fail to perform any provision of this contract, the City, after written notice to the Contractor, may, without prejudice to any other remedy the Contractor may have, make good such deficiencies, and may deduct the cost thereof from the payment then or thereafter due the Contractor.

### **15. INTERFERENCE WITH OTHERS**

The Contractor shall coordinate with the City's refuse hauler, Waste Management of RI, to allow access into the work zone for the service of trash, recycling, and yard waste collection during the construction.

The Contractor shall not interfere with materials, appliances, or workmen of the City, Public Utility Companies, or any other contractor, who may be performing work at the same sites. All contractors and other parties involved shall have equal rights as far as practicable, to the use of all roads and grounds, except as otherwise provided by these specifications. The decision of the Construction Specialist and/or Lead Hazard Program Manager shall govern in cases of disagreement between contractors or other parties regarding such use.

### **16. ASSIGNMENT**

Neither party to the Contract shall assign the contract or sublet it without the written consent of the other. The Contractor shall not assign any monies due or to become due to him hereunder, without the previous written consent of the Construction Specialist and/or Lead Hazard Program Manager.

### **17. PUBLIC SAFETY**

The Contractor shall provide, erect, and maintain continually, seven day per week and twenty-four hours per day, all necessary barricades, reflective signs, signals, flashing lights, etc., and take all necessary precautions for the protection of the work and the safety of the public. A detailed safety plan for the entire contract must be submitted to and approved by the Construction Specialist and/or Lead Hazard Program Manager prior to commencement of work under this contract.

### **18. ACCIDENT PREVENTION**

Precaution shall be exercised at all times until completion and acceptance for the protection of private property and all persons, including employees. The safety provisions of applicable laws and of local building and construction codes shall be observed. Machinery, equipment, and all hazards shall be guarded or eliminated according to the best safety regulations and procedures.

## **19. PROTECTION OF EXISTING STRUCTURES, PROPERTY, UTILITIES, WORK AND VEGETATION**

The Contractor shall arrange with all private property owners, public utility companies and all other interested parties for the relocation, maintenance and/or protection of all private property, public utility facilities, poles, fixtures, appurtenances, and service connections, within or adjacent to the limits of construction or as directed by the Director of Planning & Development.

The Contractor shall perform and carry out his work in such a manner as not to interfere with or damage fixtures mentioned herein or as shown on the plans or discovered during construction which are to be left within the limits of the project. The Contractor will preserve and protect all existing vegetation, such as trees, shrubs, and grass on or adjacent to the site, which do not unreasonably interfere with the construction as determined by the Director of Planning & Development.

The Contractor will be responsible for damage done to any telephone or power poles or transmission lines; water mains, fire hydrants and appurtenances; gas mains or service connections; sewer mains, building sewer connections and other appurtenances of a similar nature which are fixed or controlled by the City, Public Utility Company, Private Corporation, or private person.

The Contractor will be responsible for all unauthorized cutting of trees and shrubs, including damage due to careless operation of equipment, stockpiling of materials, or tracking of grass areas by equipment. The City will not be responsible for any delays or inconvenience to the Contractor in carrying on his work in the above-mentioned manner and/or while the City, Public Utility Companies or corporations are making necessary adjustment to their fixtures or appurtenances.

Damage to any kind of private or public property, not authorized in the contract, shall be repaired, or restored promptly by or at the expense of the Contractor. The Contractor must assume all responsibility for any delay or damage incurred due to working around or joining his work to fixtures left in place. No separate payment will be made for protecting, maintaining, or repairing private property. Any additional cost incurred shall be at the expense of the Contractor and shall be considered as completely covered by and included in the contract prices for the various bid items involved.

## **20. SUPERINTENDENCE BY CONTRACTOR**

The Contractor shall give efficient supervision to the work, using his best skill and attention. He will employ at the site of the work, during the entire performance thereof, a competent superintendent and any necessary assistants who will be satisfactory to the Director of Planning & Development. They shall not be changed, except with the consent of the Director of Planning & Development, unless they cease to be in the employ of the Contractor. Such superintendents shall represent and have full authority to act for the Contractor in his absence and all directions given to such superintendent shall be binding as if given to the Contractor.

## **21. INSPECTION**

The work will be conducted under the general direction of the Construction Specialist and is subject to inspection by his appointed inspectors to ensure strict compliance with the terms of the Contract. No inspector is authorized to change any provision of the specifications without written authorization from the Construction Specialist and/or Lead Hazard Program Manager nor shall the presence or absence of an inspector relieve the Contractor from any requirements of the Contract. Construction Specialist and/or Lead Hazard Program Manager shall make a thorough examination of the work as soon as practicable after the completion of the entire work or any divisible part thereof as may be designated in these specifications. Any work that will be buried, covered, or concealed in any way after its completion must be inspected by Construction Specialist and/or Lead Hazard Program Manager or one of his appointed inspectors before such work is buried, concealed, or covered. If any work should be covered without approval or consent of the Engineer, it must, if required by the Director of Planning & Development, be uncovered for examination

at the Contractor's expense.

The Construction Specialist and/or Lead Hazard Program Manager may order re-examination of questionable work, and if so ordered, the Contractor must uncover the work. The City shall pay the cost for re-examination and replacement if such work is found to be in accordance with the Contract Documents. The Contractor shall be responsible for such costs if such work is found to be not in accordance with the Contract Documents, unless shown that another contractor caused a defect in the work. The City shall pay such costs if this is found to be the case.

The Contractor shall give written notice to the Director of Planning & Development instructions, by drawings or otherwise, that will involve extra cost under this contract. He shall give such notice before proceeding to execute the work or within a reasonable time after receiving such instructions, except in the case of an emergency that shall endanger life or property. Provisions for changes in the work shall then be made. No such claim for the cost of extra work shall be valid, unless made in this manner.

## **22. SUSPENSION OF WORK**

Construction Specialist and/or Lead Hazard Program Manager may suspend all or any part of the work because of hazardous conditions caused by the Contractor's operation or whenever such suspension is necessary to insure proper execution of the Contract. Notice to suspend the work, or any part thereof, shall be given to the Contractor in writing. The City shall reimburse the Contractor for the expense incurred the Contractor in connection with the work under this Contract as a result of such suspension. The Contractor may abandon any portion of the work suspended by the City, if the work or any part thereof is stopped by a written notice or if the City does not give such written notice within seven (7) calendar days of the date fixed in the written notice to suspend. The Contractor will then be entitled to the estimates and payments for all work done on the portions of work so abandoned, if any.

## **23. RIGHT OF CANCELLATION**

The City reserves the right to delete or cancel all or any part of the work as listed in the information to Bidders or to delete or cancel any appurtenance or item thereof without recourse by the Contractor. The award of this contract is dependent upon availability of GRANT FUNDS and the successful completion of all Environmental Tier Reviews (ERR).

## **24. CITY'S RIGHT TO TERMINATE CONTRACT**

The City reserves the right to terminate the contract; if the Contractor should be adjudged bankrupt; if the Contractor should make a general assignment for the benefit of his creditors; if a receiver should be appointed on account of the Contractor's insolvency; if the Contractor should persistently or repeatedly refuse or fail to supply enough properly skilled workmen or proper materials, except in cases for which an extension of time is provided; if the Contractor should fail to make prompt payment to subcontractors or suppliers of material or labor; if the Contractor persistently and repeatedly disregards laws, ordinances or the instructions of the Director of Planning & Development; or should otherwise be guilty of a substantial violation of any provision of the Contract. The Director of Planning & Development shall certify, in writing and without prejudice to any other right or remedy, that sufficient cause exists to justify such action. Such notice shall be given to the Contractor at least seven (7) days prior to termination of the Contract. The City shall take possession of the premises and all material thereon immediately upon termination of the contract. The Contractor shall not be entitled to receive any further payments until the work is finished. If the unpaid balance of the contract price, including compensation for additional managerial and administrative service, exceeds the expense for finishing the work, the City shall pay such excess to the Contractor. If such expense exceeds such unpaid balance, the Contractor shall pay the difference to the City. The expenses and damages incurred by the City, as a result of the Contractor's

default, shall be certified by the Director of Planning & Development.

#### **24. EXTENSION OF TIME**

If the Contractor is delayed at any time in the progress of work by any act or neglect of the City or of its employees; by changes ordered in the work; by strikes, lockouts, fire, unusual transportation delays, unavoidable casualties, by any causes beyond the Contractor's control, by any delay authorized by the Construction Specialist and/or Lead Hazard Program Manager pending arbitration, or by any causes which the Construction Specialist and/or Lead Hazard Program Manager shall decide to justify the delay, then the time of completion shall be extended for such reasonable time as the Construction Specialist and/or Lead Hazard Program Manager may decide.

No such extension of time shall be made for delays which occur more than seven (7) days before a written claim is made to the Lead Hazard Program Manager. Only one claim is necessary in the case of a continuing cause for delay.

This article does not exclude the recovery of damages for delays, by either party, under other provisions of the Contract Documents.

#### **25. CORRECTION OF WORK BEFORE FINAL PAYMENT**

If the Contractor does not remove such condemned work and materials within a reasonable time, fixed by the Lead Hazard Construction Specialist and/or by written notice, the City may remove them and may store the material at the expense of the Contractor. If the Contractor does not pay the expense of such removal within ten (10) days thereafter, the City may, following an additional ten (10) days written notice, sell such materials at auction or at private sale. The City shall keep an account of the net proceeds thereof, after deducting all the costs and expenses that should have been borne by the Contractor.

#### **27. INVOICES**

The invoice will need to be submitted after the job has been approved by the Lead Hazard Construction Specialist.

#### **28. PAYMENTS**

The total price bid shall include all costs for furnishing all materials, performing all the work, and furnishing all the tools, equipment, overhead items, and incidentals necessary to complete the work. The payment will be based upon the contract price except that the City may deduct and retain various amounts to cover damages or claims.

#### **29. PAYMENT WITHHELD**

The City may withhold from final payment such payment as deemed necessary by the Lead Hazard Program Manager to protect against loss of:

- a. Defective work not remedied.
- b. Claims filed or reasonable and probable evidence of claims to be filed.
- c. Failure of the Contractor to properly make payments to subcontractors.
- d. Damage to another Contractor.

Payment shall be made in the amount withheld when the above grounds are removed.

### 30. NOT ALL CONDITIONS MAYBE RELEVANT TO THIS BID

1. Regulatory Adherence: Services provided by the selected firm and its subcontractors shall be performed in accordance with all applicable local, state, and federal laws, regulations, and guidance, including RIDOH, RIDEM and USEPA.
2. Liability & Insurance: The Department agrees to indemnify and hold the owner harmless from any claims arising out of any act or omission (negligence) of the Department or its employees, servants, agents, assigns, contractors, and representatives in the performance of the above-described actions and that all contractors shall provide and maintain in full force and effect insurance in which the City shall be named as an "additional insured." Coverage shall be not less than \$1 million per occurrence and \$2 million in aggregate.
3. Dig Safe: Contractor to make appropriate arrangements.
4. File Format: All final deliverables to be submitted in paper and electronic format unless otherwise specified by the Department.
5. Response Preparation: The Department shall not assume liability for expenses incurred by a respondent, or prospective respondent, in connection with the preparation or delivery of a response, a finalist interview, or any other action related to this RFP's selection process.
6. Payment: Payment shall be made on a reimbursement basis for services in the Scope-of-Work.
7. By submitting a response to the RFP, each firm waives all rights to protest or seek remedies whatsoever regarding any aspect of this RFP, the selection of a firm or firms with whom to negotiate, the rejection of any or all offers to negotiate, or a decision to terminate negotiations.

### 31. LEAD GENERAL REQUIREMENTS

**All program and project requirements, rules and regulations are defined in the contractor's protocols. Failure to comply may result in penalties, disciplinary actions and possibly removal from the program.**

#### **WORK WRITE UP AND STRUCTURAL BUILDING PROCEDURES:**

When not specified or clearly implied, the contractor's structural work must be done in accordance with specific city and State of Rhode Island Building Codes. All products installed must be done to the Manufacturer's Recommendation installation instructions.

#### **QUANTITIES AND MEASUREMENTS:**

Any measurements included with this bid package are not guaranteed by the City of Woonsocket Lead Program or the property owner. Neither the City of Woonsocket Lead Program nor the property owner is responsible for exact measurements. All quantities and measurements shall be field verified by each bidder. Contractor is responsible for quantities. Unless noted in the submitted bid, the contractor agrees to complete the job without claims for additional work based upon discrepancies in quantities and measurement.

#### **MATERIALS:**

All materials used in connection with this work write-up are to be new, of first quality and without defects unless stated otherwise on the specifications or approved in writing by the owner and the Construction Specialist.



### **LEAD SAFE CERTIFICATE:**

Successful passage of a Post-Abatement Environmental Lead Inspection to Lead-Safe status as defined in Section C 1.4 of the RI Regulations is required at the completion of the work and before final disbursement of funds for that property. If there are items that are not on the specifications attached that are needed to obtain a Lead-Safe Certificate, it is the contractor's responsibility to notify the construction specialist of any extra work required that may not be on the original agreed upon specifications attached. Any change orders that require extra payment or extra time must be approved in writing by and between the program manager, homeowner, and the contractor. Any failure of lead safe certifications: it will be the contractor's responsibility to cover the cost for all retests and any extended relocation costs due to the failure. It is also the contractor's responsibility to contact the unit occupant once lead safe certifications are completed to set up exchange of keys and notification, they are able to return to the unit.

### **COMMENCEMENT PROSECUTION AND COMPLETION**

The Contractor will be required to commence work under this contract within the time limit specified therein after the date of the notice to proceed, to prosecute the work with faithfulness and energy, and to have the entire work substantially completed under this contract by the limit stipulated. The Substantial Completion time is specified in **TABLE A** at the end of this section. The Substantial Completion time stipulated above shall include final cleanup of the premises.

*Table A*

|  |  |
|--|--|
| Time of Completion<br>With Lead Safe<br>Certifications | Commence within 01 consecutive<br>calendar days after the date of formal<br>execution on the contract and completed<br>within 07 days of commencement per<br>unit. |
|--|--|

*It is acknowledged that the Contractor's failure to achieve Substantial Completion of the Work within the Contract Time provided by the Contract Documents will cause the City to incur substantial economic damages and losses of types and in amounts which are impossible to compute and ascertain with certainty as a basis for recovery by the City of actual damages, and that liquidated damages represent a fair, reasonable and appropriate estimate thereof. Accordingly, in lieu of actual damages for such delay, the Contractor agrees that liquidated damages may be assessed and recovered by the City as against Contractor and its Surety, in the event of delayed completion and without the City being required to present any evidence of the amount or character of actual damages sustained by reason thereof; therefore Contractor shall be liable to the City for payment of liquidated damages in the amount of One Thousand Dollars (\$1,000) for each day that Substantial Completion is delayed beyond the Contract Time as adjusted for time extensions provided by the Contract Documents. Such liquidated damages are intended to represent estimated actual damages and are not intended as a penalty, and Contractor shall pay them to City without limiting City's right to terminate this agreement for default as provided elsewhere herein.*

### **NON-COMPLIANCE LIABILITY:**

The contractor shall comply with all applicable Federal, State, and local regulations regarding the work being performed and shall incur the costs of all fines and work requirements resulting from non-compliance. The contractor shall indemnify and hold harmless the City of Woonsocket Lead Program and the property owner from any such fine or work requirements resulting from non-compliance. City of Woonsocket Lead Program reserves the right to stop work and shut down any job where the contractor is violating any state regulation regarding the Rules and Regulations for Lead Poisoning Prevention r23-24.6PB.

**CHANGE ORDERS:**

Any additional change orders occurring after the contract signing will not be paid for and are not valid UNLESS agreed upon in writing by the property owner, and the contractor. Additional time will not be given to the contractor for any change of order unless agreed upon in writing in the change order.

**INSURANCE MINIMUMS:****Contractors Commercial General Liability Insurance**

\$1,000,000 per occurrence

\$2,000,000 policy aggregate

**Commercial Motor Vehicle Liability Insurance**

\$1,000,000 Combined Single Limit Per Occurrence

**Worker's Compensation Insurance:**

The Contractor shall furnish, to the Lead Hazard Program manager, verification of Worker Compensation insurance according to Title 28, Chapter 29, of the RI Worker Compensation Law upon award of the contract

**Contractors Pollution Liability (CPL) insurance is required:**

The Contractor shall furnish a copy to the Lead Hazard Program Manager upon award of the contract.

THE CITY OF WOONSOCKET shall be included as an "additional insured" on all policies except for Workers Compensation. Satisfactory evidence of insurance shall be furnished prior to commencement of the work. Agent's cancelation policy must be included.

**CLEANING:**

The contractor shall clean the entire house so as to ensure the property owner a Lead-Safe home. After completion of all lead hazard reduction activities and removal of containment except for critical barriers isolating work areas from no-work areas; HEPA vacuum all surfaces; wet clean all surfaces with allowable detergent (TSP) and rinse; performing a second HEPA vacuuming. Repeat cleaning cycle as needed to achieve compliance with RIDOH Lead Poisoning Prevention Regulations. Any costs associated with failed

**CONTRACTOR LICENSING:**

All contractors performing Lead Hazard Reduction work must be licensed as a Lead Hazard Reduction Contractor in accordance with Subpart D.1 of the RIDOH Lead Poisoning Prevention Regulations.

**LEAD WORKER PROTECTION:**

Persons carrying out Lead Hazard Reduction activities must receive approved training in accordance with the RIDOH Lead Poisoning Prevention Regulations and OSHA worker protection regulations. All workers on any site containing lead must possess a minimum of a 24hr Lead Workers License issued through the RIDOH.

**SIGNAGE:**

Install a prominent sign in appropriate language(s) at the front and rear entrances of the building prior to starting any lead hazard reduction activity within.

**SUPERVISOR TRAINING:**

Lead Hazard Reduction Supervisors must be trained and licensed in accordance with the current RIDOH Lead Poisoning Prevention Regulations. A 40hr licensed LHR Supervisor or licensed LHR Contractor must be present on the job site at all times when lead hazard reduction work is being performed.

**INTERIOR CONTAINMENT:**

Construct interior containment in accordance with RIDOH Lead Poisoning Prevention Regulations as applicable.

**EXTERIOR CONTAINMENT:**

Provide exterior containment and cleanup as needed in accordance with RIDOH Lead Poisoning Prevention Regulations as applicable.

**HEAT GUNS:**

No heat guns are allowed while conducting any work in the City of Woonsocket Lead Hazard Reduction Program.

**LEAD DEMO AND WASTE DISPOSAL:**

All waste, both hazardous and non-hazardous, is to be managed in accordance with all applicable Federal, State and local regulations. The Contractor and the Owner are jointly responsible for ensuring that waste classified as hazardous is transported, manifested, and delivered by licensed transports.

**ONE YEAR MATERIAL & LABOR GUARANTEE:**

All labor and material will be covered in full for a minimum of one year from the final clearance date of the project.

## **PROPOSAL ITEMS**

# Specs By Location

3/10/2024

| <b>Address: 1 Transit Street</b>        |  | <b>Unit: Common Areas</b> |       |                     |             |
|---|--|---------------------------|-------|---------------------|-------------|
| <b>Location: 1 - General Conditions</b> |  | Approx. Wall SF: 0        |       | Ceiling/Floor SF: 0 |             |
| Spec #                                  | Spec   | Quantity                  | Units | Unit Price          | Total Price |
| <b>Trade: 9</b>                         | <b>Environmental Rehab</b>   |                           |       |                     |             |
| 1                                       | <b>9001 **LEAD GENERAL REQUIREMENTS**</b><br>WORK WRITE UP AND STRUCTURAL BUILDING PROCEDURES:<br>When not specified or clearly implied, the contractor's structural work must be done in accordance with specific city and state building codes or nationally recognized "BOCA" codes. All products installed must be done to the Manufacturer's Recommendation installation instructions.<br><br>QUANTITIES AND MEASUREMENTS:<br>Any measurements included with this bid package are not guaranteed by the Woonsocket Lead Program or the property owner. Neither the Woonsocket Lead Program nor the property owner is responsible for exact measurements. All quantities and measurements shall be field verified by each bidder. Contractor is responsible for quantities. Unless noted in the submitted bid, contractor agrees to complete the job without claims for additional work based upon discrepancies in quantities and measurement.<br><br>MATERIALS:<br>All materials used in connection with this work write-up are to be new, of first quality and without defects unless stated otherwise on the specifications or approved in writing by the owner and the Construction Specialist. Unless otherwise noted windows are provided by the program.<br><br>LEAD SAFE CERTIFICATE:<br>Successful passage of a Post-Abatement Environmental Lead Inspection to Lead-Safe status as defined in Section C 1.4 of the RI Regulations is required at the completion of the work and before final disbursement of funds for that property. If there are items that are not on the specifications attached that are needed to obtain a Lead-Safe Certificate, it is the contractors responsibility to notify the construction specialist of any extra work required that may not be on the original agreed upon specifications attached. Any change orders that require extra payment or extra time must be approved in writing by and between the program manager, homeowner and the contractor.<br><br>NON-COMPLIANCE LIABILITY:<br>The contractor shall comply with all applicable Federal, State and local regulations regarding the work being performed and shall incur the costs of all fines and work requirements resulting from non-compliance. Contractor shall indemnify and hold harmless the Woonsocket Lead Program and the property owner from any such fine or work requirements resulting from non-compliance. Woonsocket Lead Program reserves the right to stop work and shut down any job where the contractor | 1.00                      | EA    |                     |             |

Location: 1 - General Conditions

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec  | Quantity | Units | Unit Price | Total Price |
|----------|---|----------|-------|------------|-------------|
| Trade: 9 | <b>Environmental Rehab</b>  |          |       |            |             |
|          | is violating any state regulation regarding the Rules and Regulations for Lead Poisoning Prevention [r23-24.6PB].   |          |       |            |             |
|          | CHANGE ORDERS:<br>Any additional change orders occurring after the contract signing will not be paid for and are not valid UNLESS agreed upon in writing by the property owner, and the contractor. Additional time will not be given to the contractor for any change order unless agreed upon in writing in the change order.   |          |       |            |             |
|          | INSURANCE:<br>The Contractor shall furnish evidence of a comprehensive public liability insurance coverage plan protecting the property owner for not less than \$300,000.00 in the event of bodily injury including death and \$50,000.00 in the event of property damage arising out of work performed by the contractor.   |          |       |            |             |
|          | CLEANING:<br>The contractor shall clean the entire house so as to ensure the property owner a Lead-Safe home. After completion of all lead hazard reduction activities and removal of containment except for critical barriers isolating work areas from no-work areas; HEPA vacuum all surfaces; wet clean all surfaces wit allowable detergent (TSP) and rinse; performing a second HEPA vacuuming. Repeat cleaning cycle as needed to achieve compliance with RIDOH Lead Poisoning Prevention Regulations. |          |       |            |             |
|          | CONTRACTOR LICENSING:<br>All contractors performing Lead Hazard Reduction work must be licensed as a Lead Hazard Reduction Contractor in accordance with Subpart D.1 of the RIDOH Lead Poisoning Prevention Regulations.  |          |       |            |             |
|          | LEAD WORKER PROTECTION:<br>Persons carrying out Lead Hazard Reduction activities must receive approved training in accordance with the RIDOH Lead Poisoning Prevention Regulations and OSHA worker protection regulations.  |          |       |            |             |
|          | HANG SIGN:<br>Install a prominent sign in appropriate language(s) at the front and rear entrances of the building prior to starting any lead hazard reduction activity within.  |          |       |            |             |
|          | SUPERVISOR TRAINING:<br>Lead Hazard Reduction Supervisors must be trained and licensed in accordance with the current RIDOH Lead Poisoning Prevention Regulations. A licensed LHR Supervisor or licensed LHR Contractor must be present on the job site at all times when lead hazard reduction work is being performed.  |          |       |            |             |
|          | INTERIOR CONTAINMENT:<br>Construct interior containment in accordance with RIDOH Lead Poisoning Prevention Regulations as applicable.   |          |       |            |             |

Address: 1 Transit Street

Unit: Common Areas

Location: 1 - General Conditions

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec  | Quantity | Units | Unit Price | Total Price |
|----------|---|----------|-------|------------|-------------|
| Trade: 9 | <b>Environmental Rehab</b>  |          |       |            |             |
|          | <p>EXTERIOR CONTAINMENT:<br/>Provide exterior containment and cleanup as needed in accordance with RIDOH Lead Poisoning Prevention Regulations as applicable.</p> <p>HEAT GUNS:<br/>No heat guns are allowed while conducting any work in the Woonsocket Lead Hazard Reduction Program.</p> <p>LEAD DEMO AND WASTE DISPOSAL:<br/>All waste, both hazardous and non-hazardous, is to be managed in accordance with all applicable Federal, State and local regulations. The Contractor and the Owner are jointly responsible for ensuring that waste classified as hazardous is transported, manifested and delivered by licensed transports.</p> <p>ONE YEAR MATERIAL &amp; LABOR GUARANTEE:<br/>All labor and material will be covered in full for a minimum of one year from the final clearance date of the project.</p> |          |       |            |             |

Location Total: \_\_\_\_\_

Location: 2 - Common Staircase

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec   | Quantity | Units | Unit Price | Total Price |
|----------|--|----------|-------|------------|-------------|
| Trade: 9 | <b>Environmental Rehab</b>   |          |       |            |             |
| 2        | <b>9123-DPD INTERIOR: FULL CONTAIN &amp; CLEAN</b>   | 1.00     | EA    | _____      | _____       |
|          | <p>Protect occupant's belongings from dust and debris contamination by covering w/ 6 mil. plastic sheeting or by moving furniture and belongings to a safe area. Upon completion of work, remove and dispose of floor and furniture containment and clean to clearance inspection standards. Upon completion of all lead hazard reduction activities and floor/furniture containment removal, HEPA Vac/wet clean/HEPA Vac all surfaces. Repeat cleaning cycle as necessary to achieve clearance inspection standards. Refer to RI Lead Regulations § 13.6. When unit/area is declared lead-safe by inspector and/or program, remove containment barriers and move furniture back into place. 14.8 for containment requirements and Section 13.6 for cleaning and clearance inspection.</p> |          |       |            |             |
| 3        | <b>9490-DPD DOOR TRIM/JAMB - STABILIZE &amp; RECOAT</b>  | 1.00     | EA    | _____      | _____       |
|          | <p>After establishing any required floor containment with polyethylene sheeting, wet mist defective paint area with water to the point of saturation. Lightly scrape all loose paint. Feather edges with a wet, 100-grit sponge sanding block saturated with deglossing agent. Wash with detergent solution, rinse, allow to dry and HEPA vacuum any paint chips, dust and debris. Spot prime and top coat with premium acrylic latex paint.</p> <p>3rd FLOOR SIDE B DOOR JAMB</p>   |          |       |            |             |
| 4        | <b>9537-DPD THRESHOLD(S): STRIP AND RECOAT</b>   | 1.00     | EA    | _____      | _____       |

|                                  |                           |
|----------------------------------|---------------------------|
| <b>Address:</b> 1 Transit Street | <b>Unit:</b> Common Areas |
|----------------------------------|---------------------------|

|                                       |                    |                     |
|---------------------------------------|--------------------|---------------------|
| <b>Location:</b> 2 - Common Staircase | Approx. Wall SF: 0 | Ceiling/Floor SF: 0 |
|---------------------------------------|--------------------|---------------------|

| Spec #          | Spec  | Quantity | Units | Unit Price | Total Price |
|-----------------|---|----------|-------|------------|-------------|
| <b>Trade: 9</b> | <b>Environmental Rehab</b>  |          |       |            |             |
|                 | Strip paint/finish to bare wood; prep, apply primer/sealer and two full coats of floor grade paint/finish. Consult Minimum Standards for Materials. |          |       |            |             |
|                 | 3rd FLOOR SIDE B DOOR THRESHOLD   |          |       |            |             |

**Location Total:** \_\_\_\_\_

|   |                    |                     |
|---|--------------------|---------------------|
| <b>Location:</b> 3 - 2nd Floor Side D Proch | Approx. Wall SF: 0 | Ceiling/Floor SF: 0 |
|---|--------------------|---------------------|

| Spec #          | Spec  | Quantity | Units | Unit Price | Total Price |
|-----------------|---|----------|-------|------------|-------------|
| <b>Trade: 9</b> | <b>Environmental Rehab</b>  |          |       |            |             |
| 5               | <b>9120-DPD EXTERIOR: CONTAINMENT SYSTEM</b><br>Establish & maintain containment according to RI Department of Environmental Management Air Pollution Control Regulation #24. Containment system shall be adequate to keep paint chips from contaminating the yard, play equipment, shrubbery, etc. and also to contain new paint spray and drips. Dispose of construction debris and vacuum paint chips. | 1.00     | EA    | _____      | _____       |
| 6               | <b>9435-DPD TRIM: EXT: STOP(S): WRAP W/ ALUMINUM</b><br>Install aluminum coil stock, min. .027 gauge, to cover exposed wood from floor to lower wall. Tack in place and caulk joints. Consult Minimum Standards for Materials.<br>COLUMN BASES  | 3.00     | EA    | _____      | _____       |
| 7               | <b>9691 PORCH DECK ENCLOSURE--T &amp; G</b><br>Stabilize deck by wet scraping. Stencil "Lead Paint" at 4' intervals on painted floor. Staple down 30 lb roofing felt. Install 3" or 4" composite deck boards, screw shank nails or power activated staples.<br>DECK FLOOR   | 100.00   | SF    | _____      | _____       |

**Location Total:** \_\_\_\_\_

|                             |                    |                     |
|-----------------------------|--------------------|---------------------|
| <b>Location:</b> 4 - Garage | Approx. Wall SF: 0 | Ceiling/Floor SF: 0 |
|-----------------------------|--------------------|---------------------|

| Spec #          | Spec   | Quantity | Units | Unit Price | Total Price |
|-----------------|--|----------|-------|------------|-------------|
| <b>Trade: 9</b> | <b>Environmental Rehab</b>   |          |       |            |             |
| 8               | <b>9122 EXTERIOR GROUND CONTAINMENT</b><br>Attach two layers of 12' wide 6 mil polyethylene sheeting to the building perimeter with staples or furring strips extending 10' past the work area. Construct a work site perimeter curb of 4" x 4" timbers wrapped under the containment. Create an outer barrier of flags or plastic tape 3' on center, 20' form work site. Close and lock all windows and doors from the interior on the work site elevation. Remove and replace daily. | 1.00     | EA    | _____      | _____       |
| 9               | <b>9649-DPD TRIM: STABILIZE &amp; RECOAT</b><br>Stabilize and prep columns; fully prime/seal and caulk seams; apply one finish coat to match existing color & finish. Consult  | 1.00     | EA    | _____      | _____       |



|  |   |  |                           |              |                     |                    |
|--|---|--|---------------------------|--------------|---------------------|--------------------|
| <b>Address: 1 Transit Street</b>                           |   |  | <b>Unit: Common Areas</b> |              |                     |                    |
| <b>Location: 4 - Garage</b>                                |   |  | Approx. Wall SF: 0        |              | Ceiling/Floor SF: 0 |                    |
| <b>Spec #</b>  | <b>Spec</b>   |  | <b>Quantity</b>           | <b>Units</b> | <b>Unit Price</b>   | <b>Total Price</b> |
| <b>Trade: 9</b>  | <b>Environmental Rehab</b>  |  |                           |              |                     |                    |
|  | Minimum Standards for Materials.<br>ALL PREVIOUSLY PAINTED COLUMNS  |  |                           |              |                     |                    |
| <b>Location Total:</b>                                     |   |  |                           |              |                     | _____              |
| <b>Location: 5 - Grounds</b>                               |   |  | Approx. Wall SF: 0        |              | Ceiling/Floor SF: 0 |                    |
| <b>Spec #</b>  | <b>Spec</b>   |  | <b>Quantity</b>           | <b>Units</b> | <b>Unit Price</b>   | <b>Total Price</b> |
| <b>Trade: 9</b>  | <b>Environmental Rehab</b>  |  |                           |              |                     |                    |
| 10   | <b>9751 BARE SOIL--SEED AND TACK</b>  |  | 10.00                     | SF           | _____               | _____              |
|  | Mow lawn using a bagging mower and dispose of waste.<br>Scratch bare soil area with a steel rake and till hard packed walking paths 6" deep. Fertilize with starter blend and re-seed with K-31 tall fescue. Mulch with straw and water. Create a 3' high barrier with string, 1" x 1" stakes and marking tape. Make arrangements for irrigation and barrier maintenance until 2" stand of grass is established.<br>SIDE B AT REAR OF HOUSE |  |                           |              |                     |                    |
| 11   | <b>9755 BARE SOIL--INSTALL 4" MULCH AND LANDSCAPE BARRIER</b>   |  | 24.00                     | SF           | _____               | _____              |
|  | Install a 4' wide, U.V. resistant landscape barrier over bare soil with 6" landscape staples 1' on center, after mowing lawn as low as practical. Overfill area with at least 4" of pine bark or shredded hardwood mulch.<br>AT LEFT SIDE OF FRONT PORCH & AROUND SIDE D  |  |                           |              |                     |                    |
| 12   | <b>9769 BARE SOIL-- INSTALL DECOMPOSED GRANITE</b>  |  | 1.00                      | SF           | _____               | _____              |
|  | Remove vegetation. Grade surface smooth and drain away from house. Wet down and compact soil. Install river stones or silimar, 2-3" thickness.<br>SIDE A UNDER DECK   |  |                           |              |                     |                    |
| <b>Location Total:</b>                                     |   |  |                           |              |                     | _____              |
| <b>Unit Total for 1 Transit Street, Unit Common Areas:</b> |   |  |                           |              |                     |                    |

|  |   |  |                      |              |                     |                    |
|--|---|--|----------------------|--------------|---------------------|--------------------|
| <b>Address: 1 Transit Street</b>       |   |  | <b>Unit: Unit 01</b> |              |                     |                    |
| <b>Location: 1 - Rm #1 Living Room</b> |   |  | Approx. Wall SF: 0   |              | Ceiling/Floor SF: 0 |                    |
| <b>Spec #</b>                          | <b>Spec</b>   |  | <b>Quantity</b>      | <b>Units</b> | <b>Unit Price</b>   | <b>Total Price</b> |
| <b>Trade: 9</b>                        | <b>Environmental Rehab</b>  |  |                      |              |                     |                    |
| 13                                     | <b>9129-DPD INTERIOR: FINAL CLEAN</b>   |  | 1.00                 | EA           | _____               | _____              |
|  | Upon completion of all lead hazard reduction activities and floor/furniture containment removal, HEPA Vac/wet clean/HEPA Vac all surfaces. Repeat cleaning cycle as necessary to achieve clearance inspection standards. Refer to RI Lead |  |                      |              |                     |                    |

Address: 1 Transit Street

Unit: Unit 01

Location: 1 - Rm #1 Living Room

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #              | Spec                | Quantity | Units | Unit Price | Total Price |
|---------------------|---------------------|----------|-------|------------|-------------|
| Trade: 9            | Environmental Rehab |          |       |            |             |
| Regulations § 13.6. |                     |          |       |            |             |

Location Total: \_\_\_\_\_

Location: 2 - Rm #2 Office

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec   | Quantity | Units | Unit Price | Total Price |
|----------|--|----------|-------|------------|-------------|
| Trade: 9 | Environmental Rehab  |          |       |            |             |
| 14       | <b>9129-DPD INTERIOR: FINAL CLEAN</b><br>Upon completion of all lead hazard reduction activities and floor/furniture containment removal, HEPA Vac/wet clean/HEPA Vac all surfaces. Repeat cleaning cycle as necessary to achieve clearance inspection standards. Refer to RI Lead Regulations § 13.6. | 1.00     | EA    | _____      | _____       |

Location Total: \_\_\_\_\_

Location: 3 - Rm #3 Bedroom

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec   | Quantity | Units | Unit Price | Total Price |
|----------|--|----------|-------|------------|-------------|
| Trade: 9 | Environmental Rehab  |          |       |            |             |
| 15       | <b>9129-DPD INTERIOR: FINAL CLEAN</b><br>Upon completion of all lead hazard reduction activities and floor/furniture containment removal, HEPA Vac/wet clean/HEPA Vac all surfaces. Repeat cleaning cycle as necessary to achieve clearance inspection standards. Refer to RI Lead Regulations § 13.6. | 1.00     | EA    | _____      | _____       |

Location Total: \_\_\_\_\_

Location: 4 - Rm #4 Playroom

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec   | Quantity | Units | Unit Price | Total Price |
|----------|--|----------|-------|------------|-------------|
| Trade: 9 | Environmental Rehab  |          |       |            |             |
| 16       | <b>9129-DPD INTERIOR: FINAL CLEAN</b><br>Upon completion of all lead hazard reduction activities and floor/furniture containment removal, HEPA Vac/wet clean/HEPA Vac all surfaces. Repeat cleaning cycle as necessary to achieve clearance inspection standards. Refer to RI Lead Regulations § 13.6. | 1.00     | EA    | _____      | _____       |

Location Total: \_\_\_\_\_

Location: 5 - Rm #5 Bedroom

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec # | Spec | Quantity | Units | Unit Price | Total Price |
|--------|------|----------|-------|------------|-------------|
|--------|------|----------|-------|------------|-------------|

Address: 1 Transit Street

Unit: Unit 01

Location: 5 - Rm #5 Bedroom

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #                       | Spec   | Quantity | Units | Unit Price | Total Price |
|------------------------------|--|----------|-------|------------|-------------|
| Trade: 9 Environmental Rehab |  |          |       |            |             |
| 17                           | <b>9129-DPD INTERIOR: FINAL CLEAN</b><br>Upon completion of all lead hazard reduction activities and floor/furniture containment removal, HEPA Vac/wet clean/HEPA Vac all surfaces. Repeat cleaning cycle as necessary to achieve clearance inspection standards. Refer to RI Lead Regulations § 13.6. | 1.00     | EA    | _____      | _____       |

Location Total: \_\_\_\_\_

Location: 6 - Rm #6 Kitchen

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #                       | Spec   | Quantity | Units | Unit Price | Total Price |
|------------------------------|--|----------|-------|------------|-------------|
| Trade: 9 Environmental Rehab |  |          |       |            |             |
| 18                           | <b>9129-DPD INTERIOR: FINAL CLEAN</b><br>Upon completion of all lead hazard reduction activities and floor/furniture containment removal, HEPA Vac/wet clean/HEPA Vac all surfaces. Repeat cleaning cycle as necessary to achieve clearance inspection standards. Refer to RI Lead Regulations § 13.6. | 1.00     | EA    | _____      | _____       |

Location Total: \_\_\_\_\_

Location: 7 - Rm #7 Bathroom

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #                       | Spec   | Quantity | Units | Unit Price | Total Price |
|------------------------------|--|----------|-------|------------|-------------|
| Trade: 9 Environmental Rehab |  |          |       |            |             |
| 19                           | <b>9129-DPD INTERIOR: FINAL CLEAN</b><br>Upon completion of all lead hazard reduction activities and floor/furniture containment removal, HEPA Vac/wet clean/HEPA Vac all surfaces. Repeat cleaning cycle as necessary to achieve clearance inspection standards. Refer to RI Lead Regulations § 13.6. | 1.00     | EA    | _____      | _____       |

Location Total: \_\_\_\_\_

Location: 8 - Rm #8 Dining Room

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #                       | Spec   | Quantity | Units | Unit Price | Total Price |
|------------------------------|--|----------|-------|------------|-------------|
| Trade: 9 Environmental Rehab |  |          |       |            |             |
| 20                           | <b>9129-DPD INTERIOR: FINAL CLEAN</b><br>Upon completion of all lead hazard reduction activities and floor/furniture containment removal, HEPA Vac/wet clean/HEPA Vac all surfaces. Repeat cleaning cycle as necessary to achieve clearance inspection standards. Refer to RI Lead Regulations § 13.6. | 1.00     | EA    | _____      | _____       |

Address: 1 Transit Street

Unit: Unit 01

Location Total: \_\_\_\_\_

Unit Total for 1 Transit Street, Unit Unit 01: \_\_\_\_\_

Address: 1 Transit Street

Unit: Unit 2 Front

Location: 1 - Rm #1 Living Room

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec  | Quantity | Units | Unit Price | Total Price |
|----------|---|----------|-------|------------|-------------|
| Trade: 9 | Environmental Rehab   |          |       |            |             |
| 21       | 9129-DPD INTERIOR: FINAL CLEAN<br>Upon completion of all lead hazard reduction activities and floor/furniture containment removal, HEPA Vac/wet clean/HEPA Vac all surfaces. Repeat cleaning cycle as necessary to achieve clearance inspection standards. Refer to RI Lead Regulations § 13.6. | 1.00     | EA    | _____      | _____       |

Location Total: \_\_\_\_\_

Location: 2 - Rm #2 Office

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec  | Quantity | Units | Unit Price | Total Price |
|----------|---|----------|-------|------------|-------------|
| Trade: 9 | Environmental Rehab   |          |       |            |             |
| 22       | 9129-DPD INTERIOR: FINAL CLEAN<br>Upon completion of all lead hazard reduction activities and floor/furniture containment removal, HEPA Vac/wet clean/HEPA Vac all surfaces. Repeat cleaning cycle as necessary to achieve clearance inspection standards. Refer to RI Lead Regulations § 13.6. | 1.00     | EA    | _____      | _____       |

Location Total: \_\_\_\_\_

Location: 3 - Rm #3 Bedroom

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec  | Quantity | Units | Unit Price | Total Price |
|----------|---|----------|-------|------------|-------------|
| Trade: 9 | Environmental Rehab   |          |       |            |             |
| 23       | 9129-DPD INTERIOR: FINAL CLEAN<br>Upon completion of all lead hazard reduction activities and floor/furniture containment removal, HEPA Vac/wet clean/HEPA Vac all surfaces. Repeat cleaning cycle as necessary to achieve clearance inspection standards. Refer to RI Lead Regulations § 13.6. | 1.00     | EA    | _____      | _____       |

Location Total: \_\_\_\_\_

Location: 4 - Rm #4 Bathroom

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec                           | Quantity | Units | Unit Price | Total Price |
|----------|--------------------------------|----------|-------|------------|-------------|
| Trade: 9 | Environmental Rehab            |          |       |            |             |
| 24       | 9129-DPD INTERIOR: FINAL CLEAN | 1.00     | EA    | _____      | _____       |

Address: 1 Transit Street

Unit: Unit 2 Front

Location: 4 - Rm #4 Bathroom

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec  | Quantity | Units | Unit Price | Total Price |
|----------|---|----------|-------|------------|-------------|
| Trade: 9 | <b>Environmental Rehab</b>  |          |       |            |             |
|          | Upon completion of all lead hazard reduction activities and floor/furniture containment removal, HEPA Vac/wet clean/HEPA Vac all surfaces. Repeat cleaning cycle as necessary to achieve clearance inspection standards. Refer to RI Lead Regulations § 13.6. |          |       |            |             |

Location Total: \_\_\_\_\_

Location: 5 - Rm #5 Kitchen

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec  | Quantity | Units | Unit Price | Total Price |
|----------|---|----------|-------|------------|-------------|
| Trade: 9 | <b>Environmental Rehab</b>  |          |       |            |             |
| 25       | <b>9129-DPD INTERIOR: FINAL CLEAN</b>   | 1.00     | EA    | _____      | _____       |
|          | Upon completion of all lead hazard reduction activities and floor/furniture containment removal, HEPA Vac/wet clean/HEPA Vac all surfaces. Repeat cleaning cycle as necessary to achieve clearance inspection standards. Refer to RI Lead Regulations § 13.6. |          |       |            |             |

Location Total: \_\_\_\_\_

Unit Total for 1 Transit Street, Unit Unit 2 Front: \_\_\_\_\_

Address: 1 Transit Street

Unit: Unit 2 Rear

Location: 1 - Rm #1 Living Room

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec  | Quantity | Units | Unit Price | Total Price |
|----------|---|----------|-------|------------|-------------|
| Trade: 9 | <b>Environmental Rehab</b>  |          |       |            |             |
| 26       | <b>9123-DPD INTERIOR: FULL CONTAIN &amp; CLEAN</b>  | 1.00     | EA    | _____      | _____       |
|          | Protect occupant's belongings from dust and debris contamination by covering w/ 6 mil. plastic sheeting or by moving furniture and belongings to a safe area. Upon completion of work, remove and dispose of floor and furniture containment and clean to clearance inspection standards. Upon completion of all lead hazard reduction activities and floor/furniture containment removal, HEPA Vac/wet clean/HEPA Vac all surfaces. Repeat cleaning cycle as necessary to achieve clearance inspection standards. Refer to RI Lead Regulations § 13.6. When unit/area is declared lead-safe by inspector and/or program, remove containment barriers and move furniture back into place. 14.8 for containment requirements and Section 13.6 for cleaning and clearance inspection. |          |       |            |             |
| 27       | <b>9547-DPD TRIM: STABILIZE &amp; RECOAT</b>  | 1.00     | EA    | _____      | _____       |
|          | Stabilize and prep trim; fully prime/seal and caulk seams; apply full finish coat to match existing color and finish. Consult Minimum Standards for Materials.<br>All BASEBOARDS  |          |       |            |             |

Address: 1 Transit Street

Unit: Unit 2 Rear

Location: 1 - Rm #1 Living Room

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec                | Quantity | Units | Unit Price | Total Price |
|----------|---------------------|----------|-------|------------|-------------|
| Trade: 9 | Environmental Rehab |          |       |            |             |

Location Total: \_\_\_\_\_

Location: 2 - Rm #2 Kitchen

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec                | Quantity | Units | Unit Price | Total Price |
|----------|---------------------|----------|-------|------------|-------------|
| Trade: 9 | Environmental Rehab |          |       |            |             |

28 9123-DPD INTERIOR: FULL CONTAIN &amp; CLEAN

1.00

EA

Protect occupant's belongings from dust and debris contamination by covering w/ 6 mil. plastic sheeting or by moving furniture and belongings to a safe area. Upon completion of work, remove and dispose of floor and furniture containment and clean to clearance inspection standards. Upon completion of all lead hazard reduction activities and floor/furniture containment removal, HEPA Vac/wet clean/HEPA Vac all surfaces. Repeat cleaning cycle as necessary to achieve clearance inspection standards. Refer to RI Lead Regulations § 13.6. When unit/area is declared lead-safe by inspector and/or program, remove containment barriers and move furniture back into place. 14.8 for containment requirements and Section 13.6 for cleaning and clearance inspection.

29 9490-DPD DOOR TRIM/JAMB - STABILIZE &amp; RECOAT

4.00

EA

After establishing any required floor containment with polyethylene sheeting, wet mist defective paint area with water to the point of saturation. Lightly scrape all loose paint. Feather edges with a wet, 100-grit sponge sanding block saturated with deglossing agent. Wash with detergent solution, rinse, allow to dry and HEPA vacuum any paint chips, dust and debris. Spot prime and top coat with premium acrylic latex paint.  
SIDE A & C DOOR JAMB (INCLUDE CLOSET)

30 9495-DPD DOOR(S): INTERIOR: :PLANE, ADJ., STABILIZE &amp; RECOAT

3.00

EA

Tighten or replace hardware screws and adjust as necessary. Strip paint from hinge barrels. Plane door edges and/or strip jamb so that a min. 1/8" gap is opened between jambs, threshold and door; also plane door and/or strip door stop to eliminate friction. Stabilize and prep door; apply full primer and full single finish coat. Owner's choice of color and finish. Consult Minimum Standards for Materials.  
SIDE A & C DOOR (INCLUDE CLOSET)

31 9537-DPD THRESHOLD(S): STRIP AND RECOAT

1.00

EA

Strip paint/finish to bare wood; prep, apply primer/sealer and two full coats of floor grade paint/finish. Consult Minimum Standards for Materials.  
SIDE C DOOR THRESHOLD

Location Total: \_\_\_\_\_

Address: 1 Transit Street

Unit: Unit 2 Rear

Location: 3 - Rm #3 Bathroom

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec  | Quantity | Units | Unit Price | Total Price |
|----------|---|----------|-------|------------|-------------|
| Trade: 9 | Environmental Rehab   |          |       |            |             |
| 32       | <b>9123-DPD INTERIOR: FULL CONTAIN &amp; CLEAN</b><br>Protect occupant's belongings from dust and debris contamination by covering w/ 6 mil. plastic sheeting or by moving furniture and belongings to a safe area. Upon completion of work, remove and dispose of floor and furniture containment and clean to clearance inspection standards. Upon completion of all lead hazard reduction activities and floor/furniture containment removal, HEPA Vac/wet clean/HEPA Vac all surfaces. Repeat cleaning cycle as necessary to achieve clearance inspection standards. Refer to RI Lead Regulations § 13.6. When unit/area is declared lead-safe by inspector and/or program, remove containment barriers and move furniture back into place. 14.8 for containment requirements and Section 13.6 for cleaning and clearance inspection. | 1.00     | EA    |            |             |
| 33       | <b>9495-DPD DOOR(S): INTERIOR: :PLANE, ADJ., STABILIZE &amp; RECOAT</b><br>Tighten or replace hardware screws and adjust as necessary. Strip paint from hinge barrels. Plane door edges and/or strip jamb so that a min. 1/8" gap is opened between jambs, threshold and door; also plane door and/or strip door stop to eliminate friction. Stabilize and prep door; apply full primer and full single finish coat. Owner's choice of color and finish. Consult Minimum Standards for Materials.<br>SIDE C DOOR JAMB   | 1.00     | EA    |            |             |

Location Total:

Location: 4 - Rm #4 Bedroom

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec  | Quantity | Units | Unit Price | Total Price |
|----------|---|----------|-------|------------|-------------|
| Trade: 9 | Environmental Rehab   |          |       |            |             |
| 34       | <b>9123-DPD INTERIOR: FULL CONTAIN &amp; CLEAN</b><br>Protect occupant's belongings from dust and debris contamination by covering w/ 6 mil. plastic sheeting or by moving furniture and belongings to a safe area. Upon completion of work, remove and dispose of floor and furniture containment and clean to clearance inspection standards. Upon completion of all lead hazard reduction activities and floor/furniture containment removal, HEPA Vac/wet clean/HEPA Vac all surfaces. Repeat cleaning cycle as necessary to achieve clearance inspection standards. Refer to RI Lead Regulations § 13.6. When unit/area is declared lead-safe by inspector and/or program, remove containment barriers and move furniture back into place. 14.8 for containment requirements and Section 13.6 for cleaning and clearance inspection. | 1.00     | EA    |            |             |
| 35       | <b>9165-DPD CLOSET(S): STABILIZE &amp; RECOAT ALL SURFACES</b><br>Stabilize and prep all components and surfaces inside the closet excluding the door; spot prime and apply full single finish coat to match existing color and finish. Consult Minimum Standards for Materials.  | 1.00     | EA    |            |             |

Address: 1 Transit Street

Unit: Unit 2 Rear

Location: 4 - Rm #4 Bedroom

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec   | Quantity | Units | Unit Price | Total Price |
|----------|--|----------|-------|------------|-------------|
| Trade: 9 | Environmental Rehab  |          |       |            |             |
|          | SIDE D CLOSET  |          |       |            |             |
| 36       | <b>9495-DPD DOOR(S): INTERIOR: :PLANE, ADJ., STABILIZE &amp; RECOAT</b><br>Tighten or replace hardware screws and adjust as necessary .<br>Strip paint from hinge barrels. Plane door edges and/or strip jamb so that a min.1/8" gap is opened between jambs, threshold and door; also plane door and/or strip door stop to eliminate friction. Stabilize and prep door; apply full primer and full single finish coat. Owner's choice of color and finish. Consult Minimum Standards for Materials.<br>SIDE A & D DOOR JAMB | 2.00     | EA    | _____      | _____       |
| 37       | <b>9547-DPD TRIM: STABILIZE &amp; RECOAT</b><br>Stabilize and prep trim; fully prime/seal and caulk seams; apply full finish coat to match existing color and finish. Consult Minimum Standards for Materials.<br>ALL BASEBOARDS   | 1.00     | EA    | _____      | _____       |

Location Total: \_\_\_\_\_

Location: 5 - Rm #5 Bedroom

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec  | Quantity | Units | Unit Price | Total Price |
|----------|---|----------|-------|------------|-------------|
| Trade: 9 | Environmental Rehab   |          |       |            |             |
| 38       | <b>9123-DPD INTERIOR: FULL CONTAIN &amp; CLEAN</b><br>Protect occupant's belongings from dust and debris contamination by covering w/ 6 mil. plastic sheeting or by moving furniture and belongings to a safe area. Upon completion of work, remove and dispose of floor and furniture containment and clean to clearance inspection standards. Upon completion of all lead hazard reduction activities and floor/furniture containment removal, HEPA Vac/wet clean/HEPA Vac all surfaces. Repeat cleaning cycle as necessary to achieve clearance inspection standards. Refer to RI Lead Regulations § 13.6. When unit/area is declared lead-safe by inspector and/or program, remove containment barriers and move furniture back into place. 14.8 for containment requirements and Section 13.6 for cleaning and clearance inspection. | 1.00     | EA    | _____      | _____       |
| 39       | <b>9165-DPD CLOSET(S): STABILIZE &amp; RECOAT ALL SURFACES</b><br>Stabilize and prep all components and surfaces inside the closet excluding the door; spot prime and apply full single finish coat to match existing color and finish. Consult Minimum Standards for Materials.<br>SIDE B CLOSET   | 1.00     | EA    | _____      | _____       |
| 40       | <b>9495-DPD DOOR(S): INTERIOR: :PLANE, ADJ., STABILIZE &amp; RECOAT</b><br>Tighten or replace hardware screws and adjust as necessary .<br>Strip paint from hinge barrels. Plane door edges and/or strip jamb so that a min.1/8" gap is opened between jambs, threshold and door; also plane door and/or strip door stop to eliminate friction. Stabilize and prep door; apply full primer and  | 2.00     | EA    | _____      | _____       |



Address: 1 Transit Street

Unit: Unit 2 Rear

Location: 5 - Rm #5 Bedroom

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec  | Quantity | Units | Unit Price | Total Price |
|----------|---|----------|-------|------------|-------------|
| Trade: 9 | <b>Environmental Rehab</b>  |          |       |            |             |
|          | full single finish coat. Owner's choice of color and finish.<br>Consult Minimum Standards for Materials.<br>SIDE A DOOR JAMB  |          |       |            |             |
| 41       | <b>9547-DPD TRIM: STABILIZE &amp; RECOAT</b>  | 1.00     | EA    | _____      | _____       |
|          | Stabilize and prep trim; fully prime/seal and caulk seams; apply full finish coat to match existing color and finish. Consult Minimum Standards for Materials.<br>ALL CHAIR RAILS |          |       |            |             |

Location Total: \_\_\_\_\_

Location: 6 - Rm #6 Bedroom

Approx. Wall SF: 0

Ceiling/Floor SF: 0

| Spec #   | Spec  | Quantity | Units | Unit Price | Total Price |
|----------|---|----------|-------|------------|-------------|
| Trade: 9 | <b>Environmental Rehab</b>  |          |       |            |             |
| 42       | <b>9123-DPD INTERIOR: FULL CONTAIN &amp; CLEAN</b>  | 1.00     | EA    | _____      | _____       |
|          | Protect occupant's belongings from dust and debris contamination by covering w/ 6 mil. plastic sheeting or by moving furniture and belongings to a safe area. Upon completion of work, remove and dispose of floor and furniture containment and clean to clearance inspection standards. Upon completion of all lead hazard reduction activities and floor/furniture containment removal, HEPA Vac/wet clean/HEPA Vac all surfaces. Repeat cleaning cycle as necessary to achieve clearance inspection standards. Refer to RI Lead Regulations § 13.6. When unit/area is declared lead-safe by inspector and/or program, remove containment barriers and move furniture back into place. 14.8 for containment requirements and Section 13.6 for cleaning and clearance inspection. |          |       |            |             |
| 43       | <b>9450-DPD WINDOW TRIM - STABILIZE &amp; RECOAT</b>  | 1.00     | EA    | _____      | _____       |
|          | After establishing any required floor containment with polyethylene sheeting, wet mist defective paint area with water to the point of saturation. Lightly scrape all loose paint. Feather edges with a wet, 100-grit sponge sanding block saturated with deglossing agent. Wash with detergent solution, rinse, allow to dry and HEPA vacuum any paint chips, dust and debris. Spot prime and top coat with premium acrylic latex paint.<br>SIDE C WINDOW CASING   |          |       |            |             |

Location Total: \_\_\_\_\_

Unit Total for 1 Transit Street, Unit Unit 2 Rear: \_\_\_\_\_

Address Grand Total for 1 Transit Street: \_\_\_\_\_

Bidder: \_\_\_\_\_

**CITY OF WOONSOCKET  
RHODE ISLAND  
FINANCE DEPARTMENT  
BID PROPOSAL**

The undersigned bidder has carefully examined the site of the work described herein has become familiar with local conditions and the character and extent of the work/ has carefully examined the Specifications and the site plan the undersigned bidder has provided to date of the contract which are acknowledged to be a part of this proposal/ the special provisions, the proposal form, the form of contract agreement, and form of contract bond, and thoroughly understands their stipulations, requirements and provisions.

The undersigned bidder has determined the quality and quantity of equipment and materials required, has investigated the location, and determined the sources of supply of materials required, has investigated labor conditions, and has arranged for the continuous prosecution of the work herein described.

The undersigned bidder hereby agrees to be bound by the award of the contract and if awarded the contract on this proposal to execute after the notice of award, the required contract agreement, and the required contract bond, of which contract this proposal, the plans for the work, and the specifications as above indicated, shall be a part.

The undersigned bidder further agrees to provide all necessary equipment, tools, labor, incidentals and other means of construction to do all the work and furnish all materials of the specified requirements which are necessary to complete the work in accordance with the proposal, the plans and the specifications and agrees to accept therefore, as payment in full, the unit prices for the various items described in the specifications and set forth in the proposal. Any "extra" or "force account work" which includes any Contractor-owned machinery or special equipment other than small tools, for use of which is approved by the Engineer, the hourly rate will not exceed that determined from the latest edition of the "Rental Rate Blue Book for Construction Equipment", will be paid for differing site conditions, changes, extra work and force account work of the standard specifications and the undersigned bidder hereby agrees to accept payment therefore as stated herein.

**CERTIFICATION SUMMARY:**

The bidder declares that this proposal is made without connection with any other person(s) making proposals for the same specifications and is in all respects fair and without collusion or fraud.

The bidder further declares that, except in the normal discharge of his/her duties, no person acting for or employed by the City of Woonsocket has a direct or indirect interest in the proposal or in any of the profits thereof.

The bidder certifies that the above statements are accurate and true and has carefully examined and read all the specifications and the contract provisions and understands that it affects the acceptability of my proposal(s).

**AUTHORITY TO CONTRACT:**

Offeror and the Principal signing on its behalf, certify that it is validly organized with authority to do business and perform the terms hereunder, is qualified to do business in Rhode Island, if applicable, and is not prohibited from entering into or performing the terms of this agreement for any reason.

**CONFLICT OF INTEREST:**

Any Offeror responding to this Invitation to Bid are required to disclose any potential conflict of interest. If the owner of the bidding firm is related to a City of Woonsocket employee, that relationship must be disclosed in writing and made a part of the bid response. Definition Related Person: Related person to a City of Woonsocket employee means a spouse or dependent child of such employee. The term extends to other individuals sharing the same household as well as siblings, parents, and non-dependent children (including step and in-law variations of those relationships) in circumstances where the City of Woonsocket employee has actual knowledge that such relative is likely to or will benefit from a particular City of Woonsocket transaction.

All items in the Proposal must have a unit bid price in words and figures. All unit bid prices must be extended. Bids will not be accepted if they contain no unit price for an item or if they contain zero in words and figures as the unit price bid.

**A) Bid Prices for All Items in Numbers for 1 Transit St., Bid No. 6222 (interior and exterior):**

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**B) Bid Prices for All Items in Words for 1 Transit St., Bid No. 6222 (interior and exterior):**

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We, the undersigned, submit this proposal for Lead Hazard Reduction – 1 Transit St., Bid No. 6222 for the City of Woonsocket and certify and agree to all the terms and conditions contained herein.

|                          |  |
|--------------------------|--|
| <b>COMPANY NAME:</b>     |  |
| <b>ADDRESS:</b>          |  |
| <b>CITY, STATE, ZIP:</b> |  |
| <b>PHONE:</b>            |  |
| <b>EMAIL:</b>            |  |
| <b>PRINT NAME:</b>       |  |
| <b>TITLE:</b>            |  |
| <b>SIGNATURE:</b>        |  |
| <b>DATE:</b>             |  |

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

|                      |          |             |                         |                      |
|----------------------|----------|-------------|-------------------------|----------------------|
| <u>1 Transit St.</u> |          | <u>1</u>    | <u>Woonsocket 02895</u> |                      |
| Street Address       |          | Unit        | City & Zip Code         |                      |
| <u>3</u>             | <u>8</u> | <u>1900</u> | <u>10-B</u>             | <u>383-60</u>        |
| # Units              | # Rooms  | Year Built  | Plat                    | Lot                  |
|                      |          |             |                         | <u>0</u>             |
|                      |          |             |                         | # Children < 6 Years |

Regulated Facility: Y ☒ N ☐ Owner- Occupied Dwelling Unit: Y ☒ N ☐ Owner-Occupied Premises: Y ☒ N ☐**Property Owner Information**Orleny M. Dorrejo Almonte

Name(s)

1 Transit St. Unit 1Woonsocket, RI 02895

Street Address

City, State, Zip Code

Phone

Other Contact

**Inspection Information**Date of Initial Inspection: 02/27/24 ☒ 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):

☐ Department of Health Initiated☐ School or Child Care Center☐ HUD☐ Real Estate Transaction☒ Other Agency City of Woonsocket☐ 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**Katie Oliver

Print Name

Katie Oliver

Signature

RIDOH License # LI00098Expiration 02/28/25

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-50-15-5), as amended.

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



## FLOOR PLAN PROPERTY SKETCH (BLOCK)

Street Address: 1 Transit St. Unit: 1 City: WoonsocketFloor 1

Floor \_\_\_\_\_

Side C

Side C

|        |             |               |        |            |
|--------|-------------|---------------|--------|------------|
| Side B | ⑤ Bedroom   |               | Side D | ⑥ Kitchen  |
|        | ④ Play Room |               |        | ⑦ Bathroom |
|        |             |               |        | ⑧ Common   |
|        | ③ Bedroom   | ① Living Room |        | Side B     |
|        | ② Office    |               |        |            |

|        |  |        |
|--------|--|--------|
| Side B |  | Side D |
|        |  |        |

Side A (Address Street)

Side A (Address Street)

Floor \_\_\_\_\_

Floor \_\_\_\_\_

Side C

Side C

|        |  |        |
|--------|--|--------|
| Side B |  | Side D |
|        |  |        |

|        |  |        |
|--------|--|--------|
| Side B |  | Side D |
|        |  |        |

Side A (Address Street)

Side A (Address Street)

Initials KLO Date 02/27/24



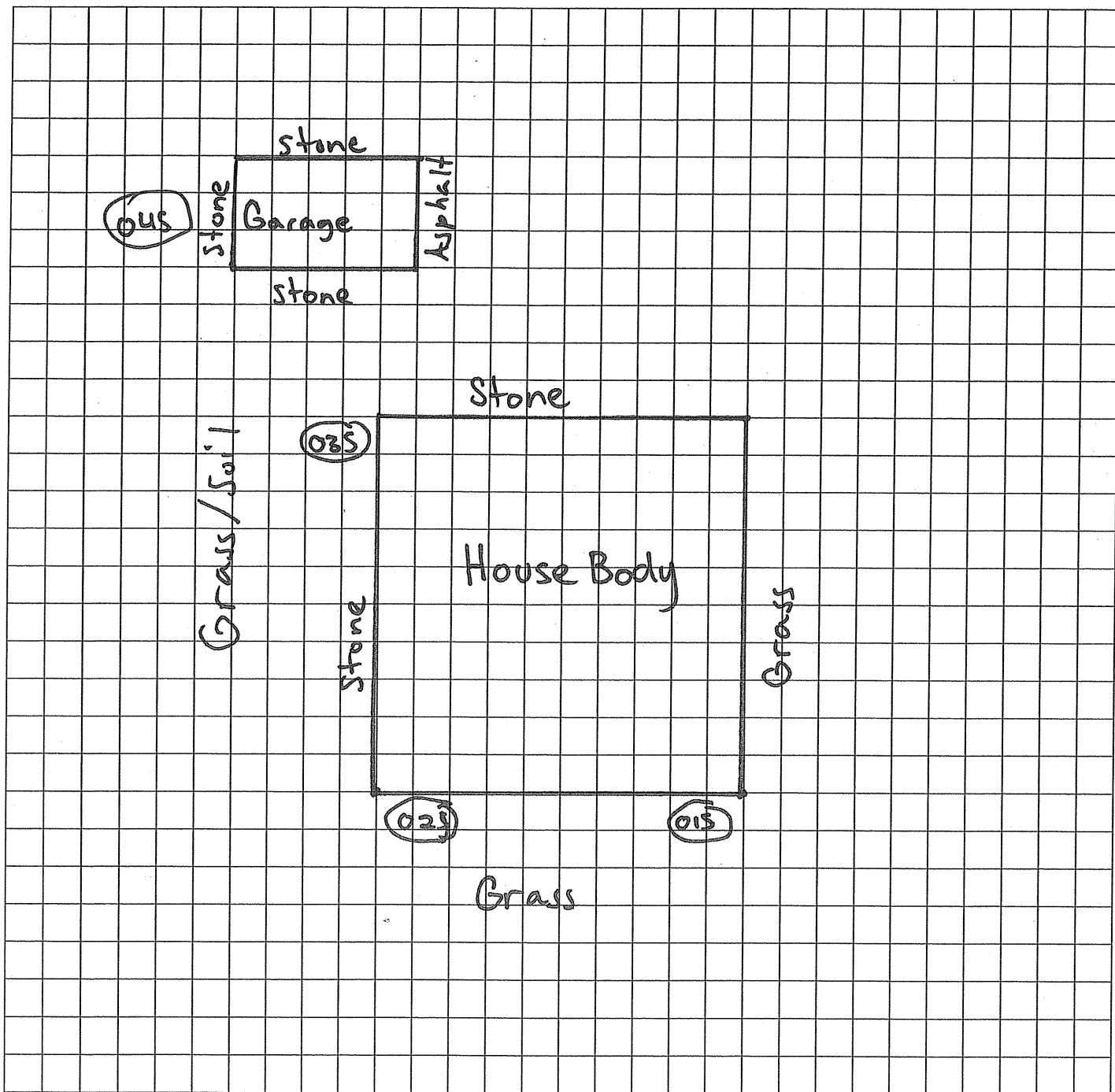
# FLOOR PLAN/PROPERTY SKETCH (GRID)

Street Address: 1 Transit St. Unit: 1 City: Woonsocket

Side C

Side B

Side D



Side A (Address Street)

Initials KLO Date 02/27/24



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

page 6 of 24

Street Address: 1 Transit St.

Unit: 1 City: Woonsocket

Room #: 1 Description: Living Room

| Surface           | Side | XRF | Condition | Lead | Remedy |
|-------------------|------|-----|-----------|------|--------|
| Ceiling           |      | 0.0 |           |      |        |
| Crown Molding     | X    |     |           |      |        |
| Wall <u>Upper</u> | A    | 0.1 |           |      |        |
| Wall <u>↓</u>     | B    | 0.1 |           |      |        |
| Wall              | C    | 0.0 |           |      |        |
| Wall              | D    | 0.0 |           |      |        |
| Chair Rail        | AI1  | 0.0 |           |      |        |
| Baseboard         | AI1  | 0.1 |           |      |        |
| Radiator          | X    |     |           |      |        |
| Floor             |      | 0.0 |           |      |        |
| Door              | A    | P78 |           |      |        |
| Door Casing       | ↓    | 0.0 |           |      |        |
| Door Jamb         | ↓    | 0.1 |           |      |        |
| Threshold         | ↓    |     | N         |      |        |
| Door              | X    |     |           |      |        |
| Door Casing       | C    | 0.2 |           |      |        |
| Door Jamb         | C    | 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       | X    |     |           |      |        |
| 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   | AI1  | 0.0 |           |      |        |
| Window Apron  | ↓    | 0.0 |           |      |        |
| Window Casing | ↓    | 0.1 |           |      |        |
| Window Jamb   | ↓    | 0.2 |           |      |        |
| Interior Stop | ↓    | 0.0 |           |      |        |
| Interior Sash | ↓    |     | N         |      |        |
| Window Well   | ↓    |     |           |      |        |
| Window Track  | ↓    |     |           |      |        |
| Exterior Sash | ↓    |     |           |      |        |
| 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    |     |           |      |        |
| 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    |     |           |      |        |
| Lower Walls   | AI1  | COV | I         | C    |        |
| Columns       | C    | 0.0 |           |      |        |
| Column Base   | C    | 0.0 |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |

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  
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Initials KLO Date 02/27/24









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

page 9 of 24

Street Address: 1 Transit St.

Unit: 1 City: Woonsocket

Room #: 4 Description: Playroom

| Surface           | Side | XRF | Condition | Lead | Remedy |
|-------------------|------|-----|-----------|------|--------|
| Ceiling           |      | 0.0 |           |      |        |
| Crown Molding     | X    |     |           |      |        |
| Wall <u>Upper</u> | A    | 0.1 |           |      |        |
| Wall              | B    | 0.1 |           |      |        |
| Wall              | C    | 0.0 |           |      |        |
| Wall              | D    | 0.0 |           |      |        |
| Chair Rail        | All  | 0.0 |           |      |        |
| Baseboard         | All  | 0.0 |           |      |        |
| Radiator          | X    |     |           |      |        |
| Floor             |      | COV | I         | C    |        |
| Door              | All  | 0.0 |           |      |        |
| Door Casing       | I    | 0.1 |           |      |        |
| Door Jamb         | I    | 0.0 |           |      |        |
| Threshold         | I    | 0.0 |           |      |        |
| 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       | B    | 0.0 |           |      |        |
| Casing            | I    | 0.0 |           |      |        |
| Closet Jamb       | I    | 0.1 |           |      |        |
| Closet Ceiling    |      | 0.0 |           |      |        |
| Closet Wall       |      | 0.0 |           |      |        |
| Closet Shelf      |      |     | N         |      |        |
| Shelf Support     | I    |     | N         |      |        |
| Closet Pole       | X    |     |           |      |        |
| Cl Baseboard      | B    | 0.0 |           |      |        |
| Closet Floor      | B    | 0.0 |           |      |        |

| Surface       | Side | XRF | Condition | Lead | Remedy |
|---------------|------|-----|-----------|------|--------|
| Window Sill   | All  | 0.0 |           |      |        |
| Window Apron  | X    | 0.1 |           |      |        |
| Window Casing | All  | 0.0 |           |      |        |
| Window Jamb   | I    | 0.0 |           |      |        |
| Interior Stop |      | 0.0 |           |      |        |
| Interior Sash |      |     | N         |      |        |
| Window Well   |      |     |           |      |        |
| Window Track  |      |     |           |      |        |
| Exterior Sash | I    |     |           |      |        |
| 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    |     |           |      |        |
| 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    |     |           |      |        |
| Lower Walls   | All  | COV | I         | C    |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |

XRF: Positive  $\geq 1.0$  mg/cm<sup>2</sup>, Test Kit "+", or "AP" = Assumed Positive; Negative  $< 1.0$  mg/cm<sup>2</sup> or "78" = Post-1978  
Condition: N = No Paint; I = Intact; D = Damaged; AD = Assumed Damaged; B = Binding or Friction  
S = Lead-Safe; C = Conditionally Lead-Safe (Positive/Intact); H = Lead-Hazard (Positive/Damaged) Remedy: COV = Covered; MI = Made Intact; REM = Removed; REP = Replaced

Initials KLO Date 02/27/24







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

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Street Address: 1 Transit St.

Unit: 1 City: Woonsocket

Room #: 6 Description (check one): ☒ Kitchen ☐ Pantry ☐ Bathroom

| Surface           | Side | XRF | Condition | Lead | Remedy |
|-------------------|------|-----|-----------|------|--------|
| Ceiling           |      | 0.0 |           |      |        |
| Crown Molding     | X    |     |           |      |        |
| Wall <u>Upper</u> | A    | 0.0 |           |      |        |
| Wall <u>↓</u>     | B    | 0.0 |           |      |        |
| Wall <u>↓</u>     | C    | 3.0 | I         | C    |        |
| Wall <u>↓</u>     | D    | 1.5 | I         | C    |        |
| Chair Rail        | All  | 0.4 |           |      |        |
| Baseboard         | All  | 0.0 |           |      |        |
| Radiator          | X    |     |           |      |        |
| Floor             |      | COV | I         | C    |        |
| Door              | X    |     |           |      |        |
| Door Casing       | B    | 0.0 |           |      |        |
| Door Jamb         | ↓    | 0.1 |           |      |        |
| Threshold         | ↓    |     | N         |      |        |
| 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     | All  | 0.0 |           |      |        |
| Window Apron    | X    |     |           |      |        |
| Window Casing   | All  | 0.0 |           |      |        |
| Window Jamb     | ↓    | 0.1 |           |      |        |
| Interior Stop   | ↓    | 0.0 |           |      |        |
| Interior Sash   |      |     | N         |      |        |
| Window Well     | ↓    |     |           |      |        |
| Window Track    | ↓    |     |           |      |        |
| Exterior Sash   | ↓    |     |           |      |        |
| 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  | All  | P78 |           |      |        |
| Upper Cab Frame | ↓    | ↓   |           |      |        |
| Upper Cab Wall  | ↓    | ↓   |           |      |        |
| Upper Cab Shelf | ↓    | ↓   |           |      |        |
| Shelf Support   | ↓    | ↓   |           |      |        |
| Lower Cab Door  | All  | P78 |           |      |        |
| Lower Cab Frame | ↓    | ↓   |           |      |        |
| Lower Cab Wall  | ↓    | ↓   |           |      |        |
| Lower Cab Shelf | ↓    | ↓   |           |      |        |
| Shelf Support   | ↓    | ↓   |           |      |        |
| Cabinet Drawer  | ↓    | ↓   |           |      |        |
| Lower Walls     | All  | 0.0 |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |

XRF: Positive  $\geq 1.0$  mg/cm<sup>2</sup>, Test Kit "+", or "AP" = Assumed Positive; Negative  $< 1.0$  mg/cm<sup>2</sup> or "78" = Post-1978  
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Initials KLO Date 02/27/24

Street Address: 1 Transit St.

Unit: 1 City: Woonsocket

Room #: 7 Description (check one): ☐ Kitchen ☐ Pantry ☒ Bathroom

| Surface        | Side | XRF  | Condition | Lead | Remedy |
|----------------|------|------|-----------|------|--------|
| Ceiling        |      | 0.0  |           |      |        |
| Crown Molding  | X    |      |           |      |        |
| Wall           | A    | 0.0  |           |      |        |
| Wall           | B    | 0.1  |           |      |        |
| Wall           | C    | 0.0  |           |      |        |
| Wall           | D    | 0.0  |           |      |        |
| Chair Rail     | X    |      |           |      |        |
| Baseboard      | All  | 0.0  |           |      |        |
| Radiator       | X    |      |           |      |        |
| Floor          |      | Low  | 1         | C    |        |
| Door           | B    | 0.18 |           |      |        |
| Door Casing    | ↓    | 0.0  |           |      |        |
| Door Jamb      | ↓    | 0.1  |           |      |        |
| Threshold      | ↓    |      | N         |      |        |
| 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    |      |           |      |        |



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

page 14 of 24Street Address: 1 Transit St.Unit: 1 City: WoonsocketRoom #: 8 Description: Dining Room

| Surface           | Side | XRF | Condition | Lead | Remedy |
|-------------------|------|-----|-----------|------|--------|
| Ceiling           |      | 0.0 |           |      |        |
| Crown Molding     | X    |     |           |      |        |
| Wall <u>Upper</u> | A    | 0.2 |           |      |        |
| Wall <u>↓</u>     | B    | 0.1 |           |      |        |
| Wall              | C    | 0.0 |           |      |        |
| Wall              | D    | 0.0 |           |      |        |
| Chair Rail        | All  | 0.0 |           |      |        |
| Baseboard         | All  | 0.0 |           |      |        |
| Radiator          | X    |     |           |      |        |
| Floor             |      | 0.0 |           |      |        |
| Door              | X    |     |           |      |        |
| Door Casing       | A    | 0.0 |           |      |        |
| Door Jamb         | A    | 0.1 |           |      |        |
| Threshold         | X    |     |           |      |        |
| Door              | X    |     |           |      |        |
| Door Casing       | C    | 0.0 |           |      |        |
| Door Jamb         | ↓    | 0.1 |           |      |        |
| Threshold         | ↓    | 0.0 | N         |      |        |
| Door              | X    |     |           |      |        |
| Door Casing       | X    |     |           |      |        |
| Door Jamb         | X    |     |           |      |        |
| Threshold         | X    |     |           |      |        |
| Door              | X    |     |           |      |        |
| Door Casing       | X    |     |           |      |        |
| Door Jamb         | X    |     |           |      |        |
| Threshold         | X    |     |           |      |        |
| Closet Door       | X    |     |           |      |        |
| 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   | All  | 0.0 |           |      |        |
| Window Apron  | ↓    | 0.1 |           |      |        |
| Window Casing | ↓    | 0.0 |           |      |        |
| Window Jamb   | ↓    | 0.2 |           |      |        |
| Interior Stop | ↓    | 0.0 |           |      |        |
| Interior Sash | ↓    |     | N         |      |        |
| Window Well   | ↓    |     |           |      |        |
| Window Track  | ↓    |     |           |      |        |
| Exterior Sash | ↓    |     |           |      |        |
| 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    |     |           |      |        |
| 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    |     |           |      |        |
| Lower Walls   | All  | COV | I         | C    |        |
| Columns       | A    | 0.0 |           |      |        |
| Column Base   | A    | 0.1 |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |

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

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Covered; MI = Made Intact; REM = Removed; REP = Replaced

Initials KLO Date 02/27/24

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

|                      |          |                |                         |               |
|----------------------|----------|----------------|-------------------------|---------------|
| <u>1 Transit St.</u> |          | <u>2 Front</u> | <u>Woonsocket 02895</u> |               |
| Street Address       |          | Unit           | City & Zip Code         |               |
| <u>3</u>             | <u>5</u> | <u>1900</u>    | <u>10-B</u>             | <u>383-60</u> |
| # Units              | # Rooms  | Year Built     | Plat                    | Lot           |
|                      |          |                | <u>0</u>                |               |
|                      |          |                | # Children < 6 Years    |               |

Regulated Facility: Y ☒ N ☐ Owner- Occupied Dwelling Unit: Y ☐ N ☒ Owner-Occupied Premises: Y ☒ N ☐**Property Owner Information**Orleny M. Dorrejo Almonte

Name(s)

1 Transit St. Unit 1Woonsocket, RI 02895

Street Address

City, State, Zip Code

Phone

Other Contact

**Inspection Information**Date of Initial Inspection: 02/27/24 ☒ 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):

☐ Department of Health Initiated☐ School or Child Care Center☐ HUD☐ Real Estate Transaction☒ Other Agency City of Woonsocket☐ 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**Katie Oliver

Print Name

Katie Oliver

Signature

RIDOH License # LI00098Expiration 02/28/25

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-50-15-5), as amended.

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

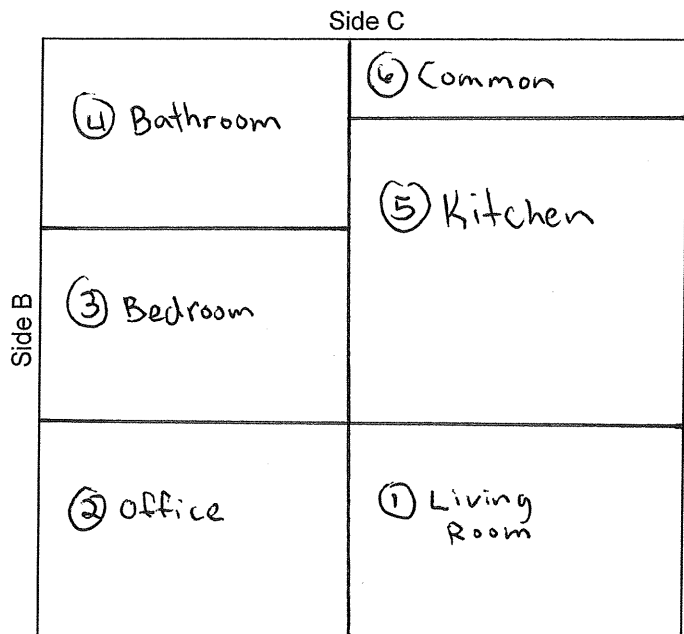




## FLOOR PLAN PROPERTY SKETCH (BLOCK)

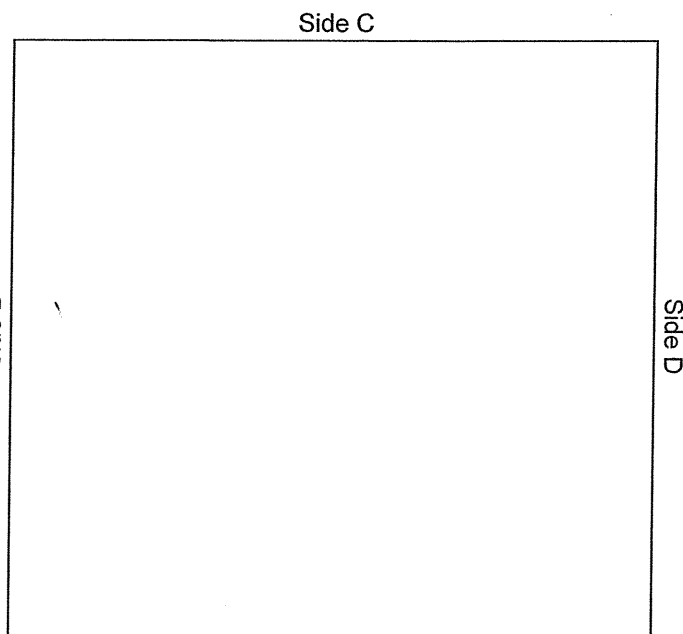
Street Address: 1 Transit St. Unit: 2F City: WoonsocketFloor 2

Floor \_\_\_\_\_



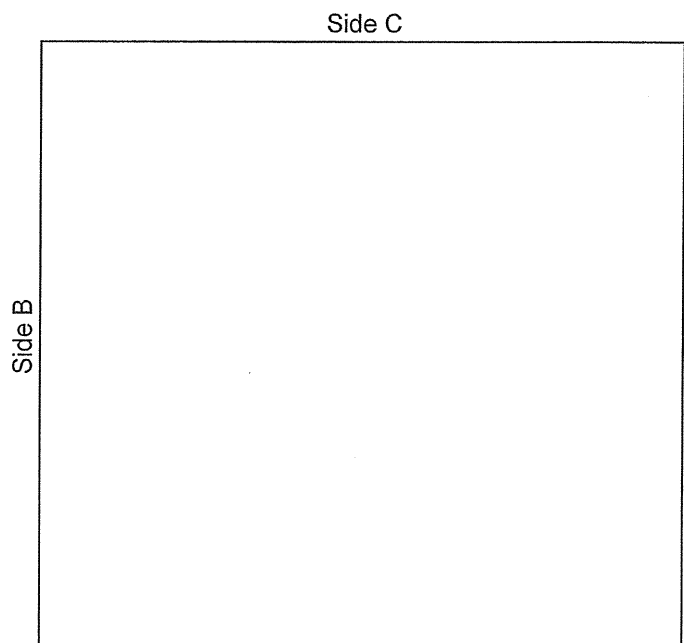
Side A (Address Street)

Floor \_\_\_\_\_

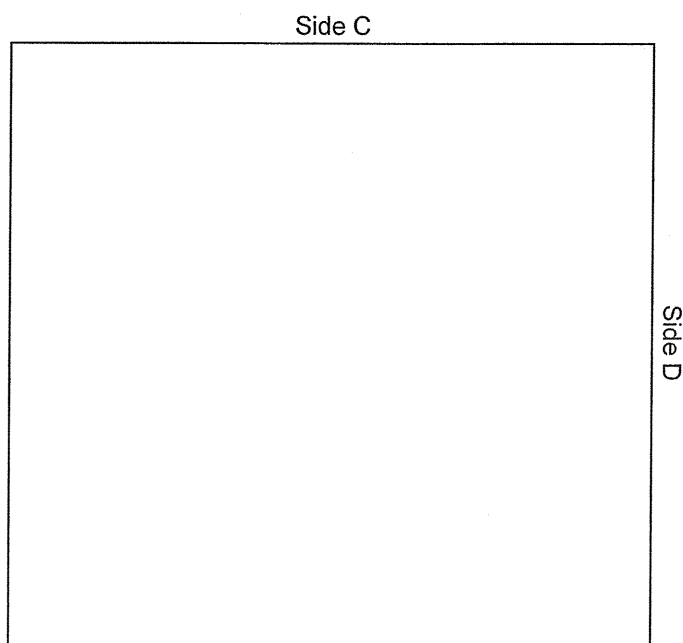


Side A (Address Street)

Floor \_\_\_\_\_



Side A (Address Street)



Side A (Address Street)

Initials KLO Date 02/27/24



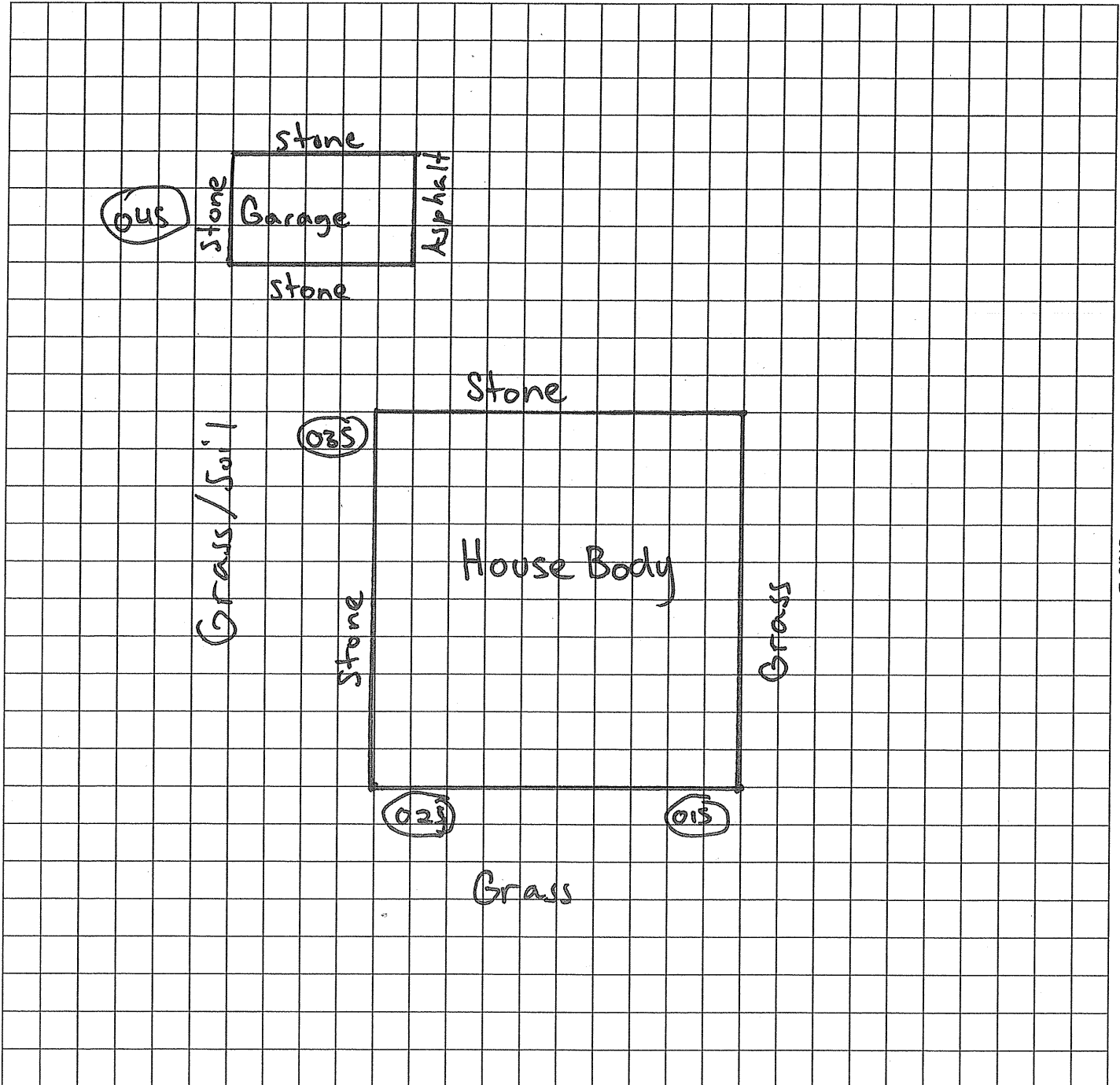
# FLOOR PLAN/PROPERTY SKETCH (GRID)

Street Address: 1 Transit St. Unit: 2F City: Woonsocket

Side C

Side B

Side D



Side A (Address Street)

Initials KLO Date 02/27/24



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

page 6 of 21

Street Address: 1 Transit St.

Unit: 2F City: Woonsocket

Room #: 1 Description: Living Room

| Surface        | Side | XRF | Condition | Lead | Remedy |
|----------------|------|-----|-----------|------|--------|
| Ceiling        |      | 0.1 |           |      |        |
| Crown Molding  | All  | 0.0 |           |      |        |
| Wall           | A    | COV | I         | C    |        |
| Wall           | B    | COV | I         | C    |        |
| Wall           | C    | COV | I         | C    |        |
| Wall           | D    | COV | I         | C    |        |
| Chair Rail     | X    |     |           |      |        |
| Baseboard      | All  | 0.1 |           |      |        |
| Radiator       | X    |     |           |      |        |
| Floor          |      | 0.0 |           |      |        |
| Door           | A    | P78 |           |      |        |
| Door Casing    |      | 0.0 |           |      |        |
| Door Jamb      |      | 0.1 |           |      |        |
| Threshold      | ↓    |     | N         |      |        |
| Door           | X    |     |           |      |        |
| Door Casing    | C    | 0.0 |           |      |        |
| Door Jamb      |      | 4.1 | I         | C    |        |
| Threshold      | ↓    |     | N         |      |        |
| Door           | X    |     |           |      |        |
| Door Casing    | X    |     |           |      |        |
| Door Jamb      | X    |     |           |      |        |
| Threshold      | X    |     |           |      |        |
| Door           | X    |     |           |      |        |
| Door Casing    | X    |     |           |      |        |
| Door Jamb      | X    |     |           |      |        |
| Threshold      | X    |     |           |      |        |
| Closet Door    | X    |     |           |      |        |
| 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   | All  | 0.5 |           |      |        |
| Window Apron  | X    |     |           |      |        |
| Window Casing | All  | 0.0 |           |      |        |
| Window Jamb   |      | 2.1 | I         | C    |        |
| Interior Stop |      | 2.4 | I         | C    |        |
| Interior Sash |      |     | N         |      |        |
| Window Well   |      |     |           |      |        |
| Window Track  |      |     |           |      |        |
| Exterior Sash | ↓    |     |           |      |        |
| 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    |     |           |      |        |
| 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  $\geq 1.0 \text{ mg/cm}^2$ , 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

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

Covered; MI = Made Intact; REM = Removed; REP = Replaced

Initials KLO Date 02/27/24





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

page 8 of 21

Street Address: 1 Transit St.

Unit: 2F City: Woonsocket

Room #: 3 Description: Bedroom

| Surface        | Side | XRF | Condition | Lead | Remedy |
|----------------|------|-----|-----------|------|--------|
| Ceiling        |      | 0.0 |           |      |        |
| Crown Molding  | All  | 0.0 |           |      |        |
| Wall           | A    | COV | I         | C    |        |
| Wall           | B    | COV | I         | C    |        |
| Wall           | C    | COV | I         | C    |        |
| Wall           | D    | COV | I         | C    |        |
| Chair Rail     | X    |     |           |      |        |
| Baseboard      | All  | 0.0 |           |      |        |
| Radiator       | X    |     |           |      |        |
| Floor          |      | 0.0 |           |      |        |
| Door           | All  | 0.0 |           |      |        |
| Door Casing    |      | 0.1 |           |      |        |
| Door Jamb      | ↓    | 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    | C    | 0.0 |           |      |        |
| Casing         |      | 0.1 |           |      |        |
| Closet Jamb    |      | 0.0 |           |      |        |
| Closet Ceiling |      | 0.0 |           |      |        |
| Closet Wall    |      | 0.0 |           |      |        |
| Closet Shelf   |      | 0.1 |           |      |        |
| Shelf Support  |      | 0.0 |           |      |        |
| Closet Pole    |      |     | N         |      |        |
| Cl Baseboard   |      | 0.0 |           |      |        |
| Closet Floor   | ↓    | 0.0 |           |      |        |

| Surface       | Side | XRF | Condition | Lead | Remedy |
|---------------|------|-----|-----------|------|--------|
| Window Sill   | B    | 0.0 |           |      |        |
| Window Apron  | X    |     |           |      |        |
| Window Casing | B    | 0.1 |           |      |        |
| Window Jamb   |      | 4.2 | I         | C    |        |
| Interior Stop |      | 3.1 | I         | C    |        |
| Interior Sash |      |     | N         |      |        |
| Window Well   |      |     |           |      |        |
| Window Track  |      |     |           |      |        |
| Exterior Sash | ↓    |     |           |      |        |
| 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    |     |           |      |        |
| 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    |     |           |      |        |
| Walls         | C/D  | 0.0 |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |
|               |      |     |           |      |        |

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  
 S = Lead-Safe; C = Conditionally Lead-Safe (Positive/Intact); H = Lead-Hazard (Positive/Damaged) Remedy: COV = Covered; MI = Made Intact; REM = Removed; REP = Replaced

Initials KLO Date 02/27/24



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

page 9 of 21

Street Address: 1 Transit St.

Unit: 2F City: Woonsocket

Room #: 4 Description (check one): ☐ Kitchen ☐ Pantry ☒ Bathroom

| Surface        | Side | XRF  | Condition | Lead | Remedy |
|----------------|------|------|-----------|------|--------|
| Ceiling        |      | 0.0  |           |      |        |
| Crown Molding  | All  |      |           |      |        |
| Wall           | A    | COV  | 1         | C    |        |
| Wall           | B    | COV  | 1         | C    |        |
| Wall           | C    | COV  | 1         | C    |        |
| Wall           | D    | COV  | 1         | C    |        |
| Chair Rail     | X    |      |           |      |        |
| Baseboard      | All  | 0.0  |           |      |        |
| Radiator       | X    |      |           |      |        |
| Floor          |      | COV  | 1         | C    |        |
| Door           | D    | 0.0  |           |      |        |
| Door Casing    | ↓    | 10.0 | 1         | C    |        |
| Door Jamb      | ↓    | 7.9  | 1         | C    |        |
| 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    |      |           |      |        |
| CI Baseboard   | X    |      |           |      |        |
| Closet Floor   | X    |      |           |      |        |

| Surface         | Side | XRF | Condition | Lead | Remedy |
|-----------------|------|-----|-----------|------|--------|
| Window Sill     | B    | 1.0 | 1         | C    |        |
| Window Apron    | ↓    | 0.0 |           |      |        |
| Window Casing   | ↓    | 3.6 | 1         | C    |        |
| Window Jamb     | X    |     |           |      |        |
| Interior Stop   | B    | 0.1 |           |      |        |
| Interior Sash   | ↓    |     | N         |      |        |
| Window Well     | ↓    |     |           |      |        |
| Window Track    | ↓    |     |           |      |        |
| Exterior Sash   | ↓    |     |           |      |        |
| 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  | C    | 0.0 |           |      |        |
| Lower Cab Frame | ↓    | 0.0 |           |      |        |
| Lower Cab Wall  | ↓    | 0.0 |           |      |        |
| Lower Cab Shelf | X    |     |           |      |        |
| Shelf Support   | X    |     |           |      |        |
| Cabinet Drawer  | X    |     |           |      |        |
| Medicine Cab.   | C    | P78 |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |

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  
 Condition: N = No Paint; I = Intact; D = Damaged; AD = Assumed Damaged; B = Binding or Friction  
 S = Lead-Safe; C = Conditionally Lead-Safe (Positive/Intact); H = Lead-Hazard (Positive/Damaged) Remedy: COV = Covered; MI = Made Intact; REM = Removed; REP = Replaced

Initials KLO Date 02/27/24



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

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Street Address: 1 Transit St.

Unit: 2F

City: Woonsocket

Room #: 5

Description (check one): ☒ Kitchen ☐ Pantry ☐ Bathroom

| Surface        | Side | XRF | Condition | Lead | Remedy |
|----------------|------|-----|-----------|------|--------|
| Ceiling        |      | 0.0 |           |      |        |
| Crown Molding  | A11  | 0.0 |           |      |        |
| Wall           | A    | COV | I         | C    |        |
| Wall           | B    | COV | I         | C    |        |
| Wall           | C    | COV | I         | C    |        |
| Wall           | D    | COV | I         | C    |        |
| Chair Rail     | X    |     |           |      |        |
| Baseboard      | A11  | 0.0 |           |      |        |
| Radiator       | X    |     |           |      |        |
| Floor          |      | COV | I         | C    |        |
| Door           | X    |     |           |      |        |
| Door Casing    | A    | 0.0 |           |      |        |
| Door Jamb      | ↓    | 0.1 |           |      |        |
| Threshold      | ↓    |     | N         |      |        |
| Door           | B1   | 0.0 |           |      |        |
| Door Casing    | ↓    | 0.1 |           |      |        |
| Door Jamb      | ↓    | 0.0 |           |      |        |
| Threshold      | ↓    |     | N         |      |        |
| Door           | B2   | 0.0 |           |      |        |
| Door Casing    | ↓    | 0.0 |           |      |        |
| Door Jamb      | ↓    | 6.4 | I         | C    |        |
| Threshold      | X    |     |           |      |        |
| Door           | C    | 0.0 |           |      |        |
| Door Casing    | ↓    | 0.0 |           |      |        |
| Door Jamb      | ↓    | 0.1 |           |      |        |
| Threshold      | ↓    |     | N         |      |        |
| 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     | A11  | 0.8 |           |      |        |
| Window Apron    | X    |     |           |      |        |
| Window Casing   | A11  | 0.0 |           |      |        |
| Window Jamb     | X    |     |           |      |        |
| Interior Stop   | A11  | 1.3 | I         | C    |        |
| Interior Sash   | ↓    |     | N         |      |        |
| Window Well     | ↓    |     |           |      |        |
| Window Track    | ↓    |     |           |      |        |
| Exterior Sash   | ↓    |     |           |      |        |
| 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  | C    | 0.0 |           |      |        |
| Upper Cab Frame | ↓    | 0.1 |           |      |        |
| Upper Cab Wall  | ↓    | 2.1 | I         | C    |        |
| Upper Cab Shelf | ↓    | 0.1 |           |      |        |
| Shelf Support   | X    |     |           |      |        |
| Lower Cab Door  | C    | 0.0 |           |      |        |
| Lower Cab Frame | ↓    | 0.1 |           |      |        |
| Lower Cab Wall  | ↓    | 0.0 |           |      |        |
| Lower Cab Shelf | X    |     |           |      |        |
| Shelf Support   | C    | 0.0 |           |      |        |
| Cabinet Drawer  | C    | 0.0 |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |

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  
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Initials KLO Date 02/27/24

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

|                |         |            |      |                  |                      |
|----------------|---------|------------|------|------------------|----------------------|
| 1 Transit St.  |         | 2 Rear     |      | Woonsocket 02895 |                      |
| Street Address |         | Unit       |      | City & Zip Code  |                      |
| 3              | 6       | 1900       | 10-B | 383-60           | 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**

Orleny M. Dorrejo Almonte

|                      |                       |
|----------------------|-----------------------|
| Name(s)              |                       |
| 1 Transit St. Unit 1 | Woonsocket, RI 02895  |
| Street Address       | City, State, Zip Code |
| Phone                | Other Contact         |

**Inspection Information**Date of Initial Inspection: 02/27/24 ☒ 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 type="checkbox"/> HUD   | <input type="checkbox"/> Real Estate Transaction      |
| <input checked="" type="checkbox"/> Other Agency <u>City of Woonsocket</u> | <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**

|                                |                            |
|--------------------------------|----------------------------|
| Katie Oliver                   | <u>Katie Oliver</u>        |
| Print Name                     | Signature                  |
| RIDOH License # <u>LI00098</u> | Expiration <u>02/28/25</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-50-15-5), as amended.

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



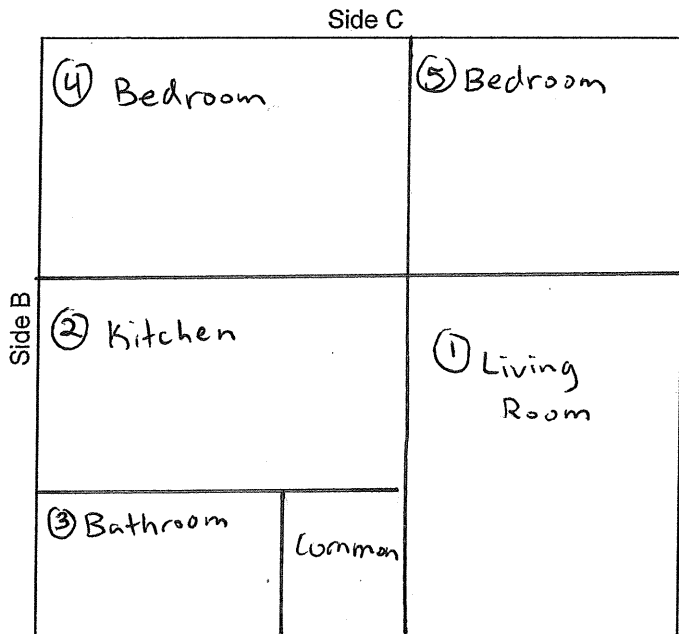


# FLOOR PLAN PROPERTY SKETCH (BLOCK)

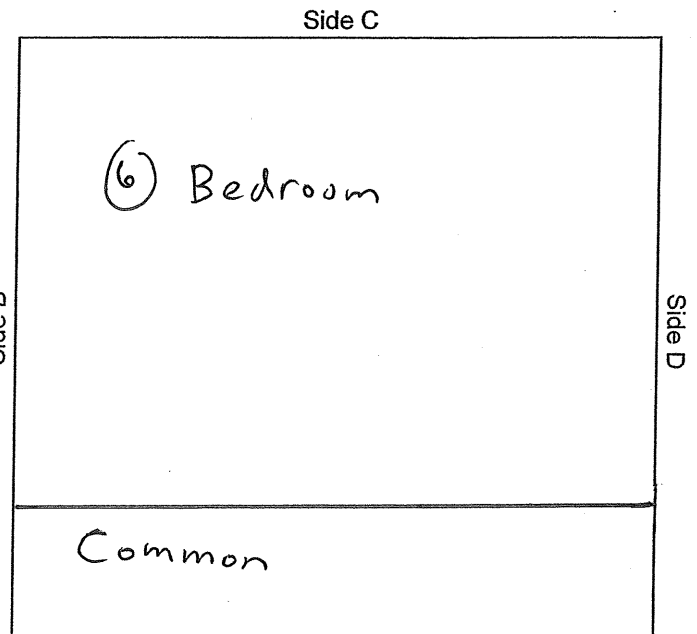
Street Address: 1 Transit St. Unit: 2R City: Woonsocket

Floor 2

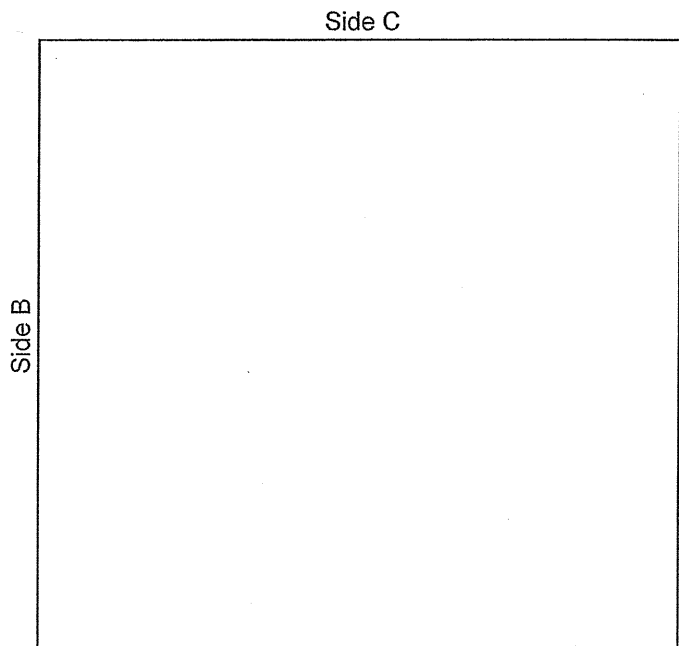
Floor 3



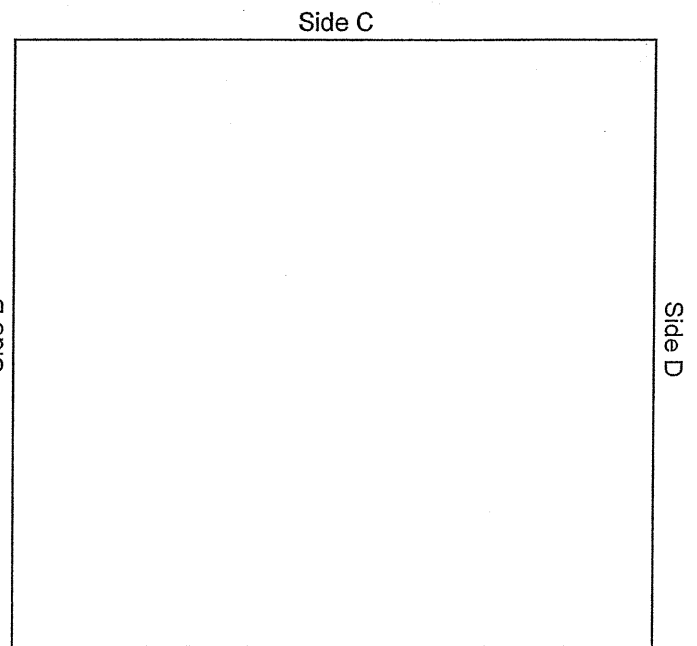
Floor \_\_\_\_\_



Floor \_\_\_\_\_



Side A (Address Street)



Side A (Address Street)

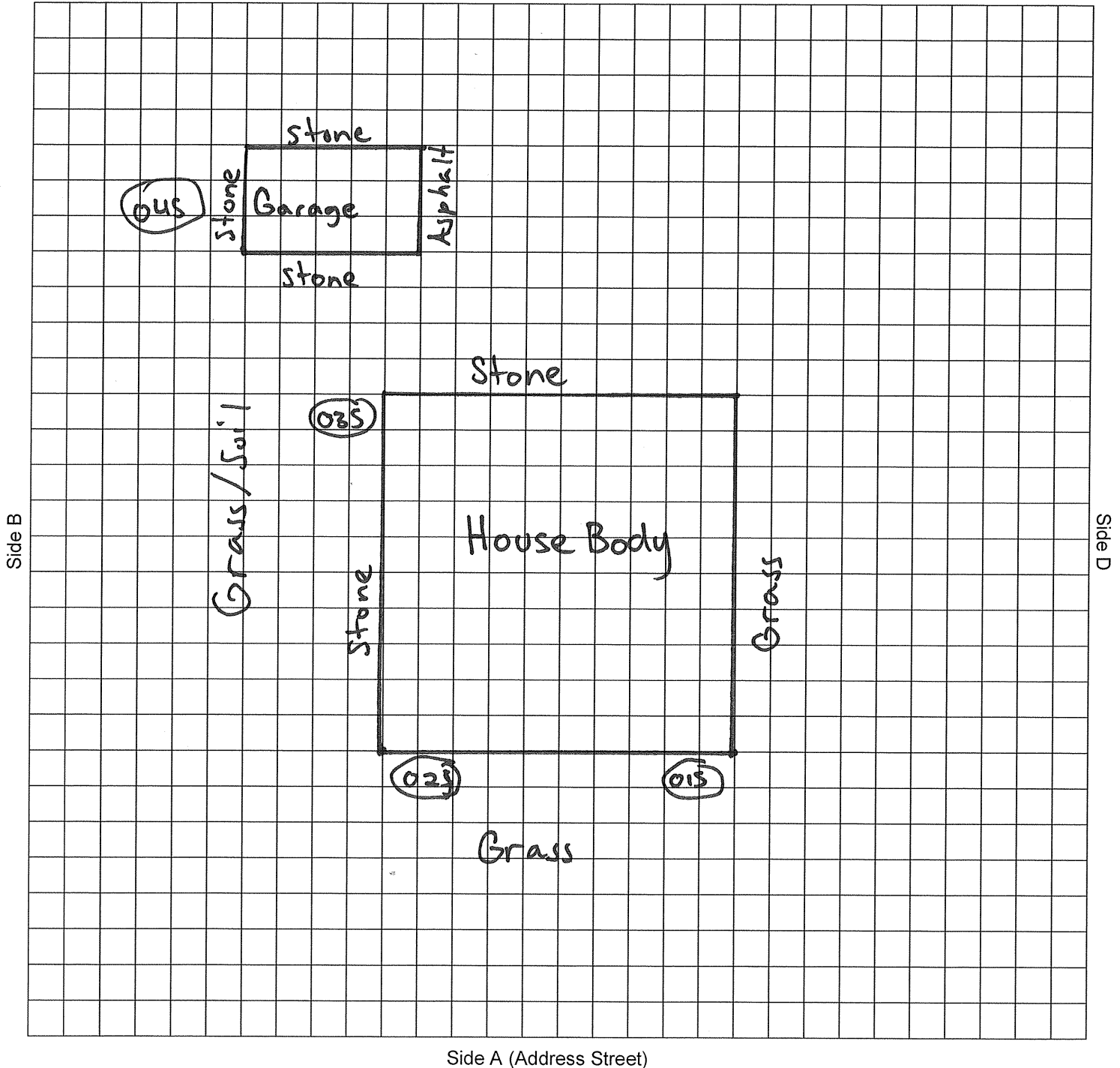
Initials KLO Date 02/27/24



FLOOR PLAN/PROPERTY SKETCH (GRID)

Street Address: 1 Transit St. Unit: 2R City: Woonsocket

Side C



Side A (Address Street)

Initials KLO Date 02/27/24



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

page 6 of 21

Street Address: 1 Transit St.

Unit: 2R City: Woonsocket

Room #: 1 Description: Living Room

| Surface        | Side | XRF | Condition | Lead | Remedy |
|----------------|------|-----|-----------|------|--------|
| Ceiling        |      | 0.0 |           |      |        |
| Crown Molding  | All  | 0.1 |           |      |        |
| Wall           | A    | COV | 1         | C    |        |
| Wall           | B    | COV | 1         | C    |        |
| Wall           | C    | COV | 1         | C    |        |
| Wall           | D    | COV | 1         | C    |        |
| Chair Rail     | X    |     |           |      |        |
| Baseboard      | All  | 3.7 | D         | H    |        |
| Radiator       | X    |     |           |      |        |
| Floor          |      | 0.0 |           |      |        |
| Door           | X    |     |           |      |        |
| Door Casing    | B    | 5.7 | 1         | C    |        |
| Door Jamb      | ↓    | 3.8 | 1         | C    |        |
| Threshold      | ↓    | 0.0 |           |      |        |
| Door           | C    | 0.0 |           |      |        |
| Door Casing    | ↓    | 1.8 | 1         | C    |        |
| Door Jamb      | ↓    | 1.1 | 1         | C    |        |
| Threshold      | ↓    | 0.0 |           |      |        |
| Door           | X    |     |           |      |        |
| Door Casing    | X    |     |           |      |        |
| Door Jamb      | X    |     |           |      |        |
| Threshold      | X    |     |           |      |        |
| Door           | X    |     |           |      |        |
| Door Casing    | X    |     |           |      |        |
| Door Jamb      | X    |     |           |      |        |
| Threshold      | X    |     |           |      |        |
| Closet Door    | X    |     |           |      |        |
| 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    | 2.9 | 1         | C    |        |
| Window Apron  | ↓    | 0.0 |           |      |        |
| Window Casing | ↓    | 0.0 |           |      |        |
| Window Jamb   | ↓    | 0.1 |           |      |        |
| Interior Stop | ↓    | 0.0 |           |      |        |
| Interior Sash |      |     | N         |      |        |
| Window Well   | ↓    |     | ↓         |      |        |
| Window Track  | ↓    |     |           |      |        |
| Exterior Sash | ↓    |     | ↓         |      |        |
| 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    |     |           |      |        |
| 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    |     |           |      |        |
| Handrail      |      | 0.0 |           |      |        |
| Treads        |      | COV | 1         | C    |        |
| Risers        |      | 0.0 |           |      |        |
| Balusters     |      | 0.0 |           |      |        |
| Column        |      | 0.0 |           |      |        |

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

S = Lead-Safe; C = Conditionally Lead-Safe (Positive/Intact); H = Lead-Hazard (Positive/Damaged) Remedy: COV = Covered; MI = Made Intact; REM = Removed; REP = Replaced

Initials KLO Date 02/27/24



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

page 1 of 21

Street Address: 1 Transit St.

Unit: 2R City: Woonsocket

Room #: 2 Description (check one): ☒ Kitchen ☐ Pantry ☐ Bathroom

| Surface           | Side | XRF | Condition | Lead | Remedy |
|-------------------|------|-----|-----------|------|--------|
| Ceiling           |      | 0.0 |           |      |        |
| Crown Molding     | A11  | 0.1 |           |      |        |
| Wall <u>Upper</u> | A    | 0.0 |           |      |        |
| Wall <u>↓</u>     | B    | 0.0 |           |      |        |
| Wall <u>↓</u>     | C    | 0.0 |           |      |        |
| Wall <u>↓</u>     | D    | 0.0 |           |      |        |
| Chair Rail        | A11  | 0.1 |           |      |        |
| Baseboard         | A11  | 0.0 |           |      |        |
| Radiator          | X    |     |           |      |        |
| Floor             |      | COV | I         | C    |        |
| Door              | A1   | P78 |           |      |        |
| Door Casing       | ↓    | 0.0 |           |      |        |
| Door Jamb         | ↓    | 0.1 |           |      |        |
| Threshold         | ↓    |     | N         |      |        |
| Door              | A2   | P78 |           |      |        |
| Door Casing       | ↓    | 0.0 |           |      |        |
| Door Jamb         | ↓    | 6.6 | D/B       | H    |        |
| Threshold         | ↓    |     | N         |      |        |
| Door              | C1   | 3.1 | D/B       | H    |        |
| Door Casing       | ↓    | 0.0 |           |      |        |
| Door Jamb         | ↓    | 1.3 | D/B       | H    |        |
| Threshold         | ↓    | 0.0 |           |      |        |
| Door              | C2   | 0.0 |           |      |        |
| Door Casing       | ↓    | 0.0 |           |      |        |
| Door Jamb         | ↓    | 1.9 | D/B       | H    |        |
| Threshold         | ↓    | 1.0 | D         | H    |        |
| Closet Door       | C    | 0.0 |           |      |        |
| Closet Casing     | X    |     |           |      |        |
| Closet Jamb       | C    | 2.6 | D/B       | H    |        |
| Closet Ceiling    | ↓    | 0.0 |           |      |        |
| Closet Wall       | ↓    | COV | I         | C    |        |
| Closet Shelf      | ↓    | 0.0 |           |      |        |
| Shelf Support     | ↓    | 0.1 |           |      |        |
| Closet Pole       | X    |     |           |      |        |
| CI Baseboard      | X    |     |           |      |        |
| Closet Floor      | C    | COV | I         | C    |        |

| Surface         | Side | XRF | Condition | Lead | Remedy |
|-----------------|------|-----|-----------|------|--------|
| Window Sill     | A11  | 0.0 |           |      |        |
| Window Apron    | ↓    | 0.1 |           |      |        |
| Window Casing   | ↓    | 0.0 |           |      |        |
| Window Jamb     | ↓    | 1.6 | I         | C    |        |
| Interior Stop   | ↓    | 0.1 |           |      |        |
| Interior Sash   | ↓    |     | N         |      |        |
| Window Well     | ↓    |     |           |      |        |
| Window Track    | ↓    |     |           |      |        |
| Exterior Sash   | ↓    |     |           |      |        |
| 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  | A11  | P78 |           |      |        |
| Upper Cab Frame | ↓    | ↓   |           |      |        |
| Upper Cab Wall  | ↓    | ↓   |           |      |        |
| Upper Cab Shelf | ↓    | ↓   |           |      |        |
| Shelf Support   | ↓    | ↓   |           |      |        |
| Lower Cab Door  | A11  | P78 |           |      |        |
| Lower Cab Frame | ↓    | ↓   |           |      |        |
| Lower Cab Wall  | ↓    | ↓   |           |      |        |
| Lower Cab Shelf | ↓    | ↓   |           |      |        |
| Shelf Support   | ↓    | ↓   |           |      |        |
| Cabinet Drawer  | ↓    | ↓   |           |      |        |
| Lower Walls     | A11  | 0.0 |           |      |        |
| Door Casing     | D    | 0.0 |           |      |        |
| Door Jamb       | ↓    | 2.8 | I         | C    |        |
| Door Thres.     | ↓    | 0.0 |           |      |        |

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Covered; MI = Made Intact; REM = Removed; REP = Replaced

Initials KLO Date 02/27/24





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

page 9 of 20Street Address: 1 Transit St.Unit: 2R City: WoonsocketRoom #: 4 Description: Bedroom

| Surface        | Side | XRF  | Condition | Lead | Remedy |
|----------------|------|------|-----------|------|--------|
| Ceiling        |      | 0.0  |           |      |        |
| Crown Molding  | X    |      |           |      |        |
| Wall           | A    | COV  | I         | C    |        |
| Wall           | B    | COV  | I         | C    |        |
| Wall           | C    | COV  | I         | C    |        |
| Wall           | D    | COV  | I         | C    |        |
| Chair Rail     | X    |      |           |      |        |
| Baseboard      | All  | 10.0 | D         | H    |        |
| Radiator       | X    |      |           |      |        |
| Floor          |      | 0.0  |           |      |        |
| Door           | A    | 1.8  | I         | C    |        |
| Door Casing    | I    | 0.4  |           |      |        |
| Door Jamb      | I    | 2.3  | DIB       | H    |        |
| Threshold      | I    | 0.0  |           |      |        |
| Door           | D    | 0.0  |           |      |        |
| Door Casing    | I    | 0.1  |           |      |        |
| Door Jamb      | I    | 8.4  | DIB       | H    |        |
| Threshold      | I    | 0.0  |           |      |        |
| Door           | X    |      |           |      |        |
| Door Casing    | X    |      |           |      |        |
| Door Jamb      | X    |      |           |      |        |
| Threshold      | X    |      |           |      |        |
| Door           | X    |      |           |      |        |
| Door Casing    | X    |      |           |      |        |
| Door Jamb      | X    |      |           |      |        |
| Threshold      | X    |      |           |      |        |
| Closet Door    | D    | 0.0  |           |      |        |
| Casing         | I    | 2.8  | D         | H    |        |
| Closet Jamb    | I    | 5.9  | DIB       | H    |        |
| Closet Ceiling | I    | 0.3  |           |      |        |
| Closet Wall    | I    | 1.7  | D         | H    |        |
| Closet Shelf   | I    | 0.0  |           |      |        |
| Shelf Support  | I    | 0.1  |           |      |        |
| Closet Pole    | I    |      | N         |      |        |
| Cl Baseboard   | I    | 1.4  | D         | H    |        |
| Closet Floor   | I    | 0.0  |           |      |        |

| Surface        | Side | XRF | Condition | Lead | Remedy |
|----------------|------|-----|-----------|------|--------|
| Window Sill    | C    | 0.4 |           |      |        |
| Window Apron   | I    | 1.0 | I         | C    |        |
| Window Casing  | I    | 0.1 |           |      |        |
| Window Jamb    | I    | 3.0 | I         | C    |        |
| Interior Stop  | I    | 1.3 | I         | C    |        |
| Interior Sash  |      |     | N         |      |        |
| Window Well    |      |     |           |      |        |
| Window Track   |      |     |           |      |        |
| Exterior Sash  | I    |     |           |      |        |
| 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    |     |           |      |        |
| 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    |     |           |      |        |
| Cl. Lower Wall | All  | COV | I         | C    |        |
| Cl. Chair Rail | All  | 2.4 | I         | C    |        |
|                |      |     |           |      |        |
|                |      |     |           |      |        |
|                |      |     |           |      |        |
|                |      |     |           |      |        |
|                |      |     |           |      |        |
|                |      |     |           |      |        |
|                |      |     |           |      |        |
|                |      |     |           |      |        |

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Initials KLO Date 02/27/24



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

page 10 of 21

Street Address: 1 Transit St.

Unit: 2R City: Woonsocket

Room #: 5 Description: Bedroom

| Surface        | Side | XRF | Condition | Lead | Remedy |
|----------------|------|-----|-----------|------|--------|
| Ceiling        |      | 0.0 |           |      |        |
| Crown Molding  | X    |     |           |      |        |
| Wall           | A    | COV | I         | C    |        |
| Wall           | B    | COV | I         | C    |        |
| Wall           | C    | COV | I         | C    |        |
| Wall           | D    | COV | I         | C    |        |
| Chair Rail     | X    |     |           |      |        |
| Baseboard      | All  | 0.0 |           |      |        |
| Radiator       | X    |     |           |      |        |
| Floor          |      | 0.0 |           |      |        |
| Door           | A    | 0.1 |           |      |        |
| Door Casing    | I    | 0.1 |           |      |        |
| Door Jamb      | I    | 5.4 | D/B       | H    |        |
| Threshold      | I    | 0.0 |           |      |        |
| Door           | X    |     |           |      |        |
| Door Casing    | B    | 0.0 |           |      |        |
| Door Jamb      | I    | 4.0 | I         | C    |        |
| Threshold      | I    | 0.0 |           |      |        |
| Door           | X    |     |           |      |        |
| Door Casing    | X    |     |           |      |        |
| Door Jamb      | X    |     |           |      |        |
| Threshold      | X    |     |           |      |        |
| Door           | X    |     |           |      |        |
| Door Casing    | X    |     |           |      |        |
| Door Jamb      | X    |     |           |      |        |
| Threshold      | X    |     |           |      |        |
| Closet Door    | X    |     |           |      |        |
| Casing         | B    | 1.7 | D         | H    |        |
| Closet Jamb    | I    | 1.5 | I         | C    |        |
| Closet Ceiling | I    | 0.0 |           |      |        |
| Closet Wall    | I    | 1.8 | D         | H    |        |
| Closet Shelf   | I    | 0.0 |           |      |        |
| Shelf Support  | I    | 0.1 |           |      |        |
| Closet Pole    | I    |     | N         |      |        |
| Cl Baseboard   | I    | 8.6 | I         | C    |        |
| Closet Floor   | I    | 0.0 |           |      |        |

| Surface         | Side | XRF | Condition | Lead | Remedy |
|-----------------|------|-----|-----------|------|--------|
| Window Sill     | C    | 0.0 |           |      |        |
| Window Apron    | I    | 0.1 |           |      |        |
| Window Casing   | I    | 0.1 |           |      |        |
| Window Jamb     | I    | 1.3 | I         | C    |        |
| Interior Stop   | I    | 1.1 | I         | C    |        |
| Interior Sash   |      |     | N         |      |        |
| Window Well     |      |     |           |      |        |
| Window Track    |      |     |           |      |        |
| Exterior Sash   | I    |     |           |      |        |
| Exterior Stop   | X    |     |           |      |        |
| Window Sill     | D    | 0.0 |           |      |        |
| Window Apron    | I    | 0.1 |           |      |        |
| Window Casing   | I    | 0.0 |           |      |        |
| Window Jamb     | I    | 1.8 | I         | C    |        |
| Interior Stop   | I    | 0.3 |           |      |        |
| Interior Sash   |      |     | N         |      |        |
| Window Well     |      |     |           |      |        |
| Window Track    |      |     |           |      |        |
| Exterior Sash   | I    |     |           |      |        |
| 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    |     |           |      |        |
| Cl. Lower Walls | All  | COV | I         | C    |        |
| Cl. Chair Rails | All  | 1.1 | D         | H    |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |
|                 |      |     |           |      |        |

XRF: Positive  $\geq 1.0$  mg/cm<sup>2</sup>, Test Kit "+", or "AP" = Assumed Positive; Negative  $< 1.0$  mg/cm<sup>2</sup> or "78" = Post-1978  
Condition: N = No Paint; I = Intact; D = Damaged; AD = Assumed Damaged; B = Binding or Friction  
S = Lead-Safe; C = Conditionally Lead-Safe (Positive/Intact); H = Lead-Hazard (Positive/Damaged) Remedy: COV = Covered; MI = Made Intact; REM = Removed; REP = Replaced

Initials KLO Date 02/21/24

Unit: 2R City: Woonsocket

Room #: 6 Description: Bedroom

| Surface        | Side | XRF | Condition | Lead | Remedy |
|----------------|------|-----|-----------|------|--------|
| Ceiling        |      | 0.0 |           |      |        |
| Crown Molding  | X    |     |           |      |        |
| Wall           | A    | 0.0 |           |      |        |
| Wall           | B    | 0.1 |           |      |        |
| Wall           | C    | 0.0 |           |      |        |
| Wall           | D    | 0.0 |           |      |        |
| Chair Rail     | X    |     |           |      |        |
| Baseboard      | All  | 0.2 |           |      |        |
| Radiator       | X    |     |           |      |        |
| Floor          |      | COV | 1         | C    |        |
| Door           | A1   | 0.0 |           |      |        |
| Door Casing    | ↓    | 0.0 |           |      |        |
| Door Jamb      | ↓    | 0.1 |           |      |        |
| Threshold      | X    |     |           |      |        |
| Door           | A2   | 0.0 |           |      |        |
| Door Casing    | ↓    | 0.0 |           |      |        |
| Door Jamb      | ↓    | 0.2 |           |      |        |
| Threshold      | X    |     |           |      |        |
| Door           | X    |     |           |      |        |
| Door Casing    | X    |     |           |      |        |
| Door Jamb      | X    |     |           |      |        |
| Threshold      | X    |     |           |      |        |
| Door           | X    |     |           |      |        |
| Door Casing    | X    |     |           |      |        |
| Door Jamb      | X    |     |           |      |        |
| Threshold      | X    |     |           |      |        |
| Closet Door    | A    | 0.0 |           |      |        |
| Casing         | ↓    | 0.0 |           |      |        |
| Closet Jamb    | ↓    | 0.1 |           |      |        |
| Closet Ceiling | ↓    | 0.0 |           |      |        |
| Closet Wall    | ↓    | 0.0 |           |      |        |
| Closet Shelf   | ↓    | 0.0 |           |      |        |
| Shelf Support  | ↓    | 0.0 |           |      |        |
| Closet Pole    | ↓    | 0.0 |           |      |        |
| CI Baseboard   | ↓    | 0.0 |           |      |        |
| Closet Floor   | ↓    | COV | 1         | C    |        |





## DUST INSPECTION

Street Address: 1 Transit St. Unit: 2R City: Woonsocket

Sampling Date: 02/27/24 Analyzing Laboratory or ELPAT Accreditation: Schneider Laboratories Global, Inc

| Sample #   | Room #/Side | Dust Wipe Surface | *Sample Area (Dimensions) | Lab Result ( $\mu\text{g}/\text{ft}^2$ ) | Lead |
|--|-------------|-------------------|---------------------------|--|------|
| 1D   | Rm 1 / B    | Floor             | 12 x 12                   | 14.9                                     | H    |
| 2D   | Rm 1 / D    | Sill              | 2 3/4 X 32                | < 8.18                                   | S    |
| 3D   | Rm 2 / A    | Floor             | 12 x 12                   | 15.8                                     | H    |
| 4D   | Rm 2 / B    | Sill              | 4 3/4 X 32                | 26.5                                     | S    |
| 5D   | Rm 4 / A    | Floor             | 12 x 12                   | 10.3                                     | H    |
| 6D   | Rm 4 / C    | Sill              | 3 1/2 X 32                | < 6.43                                   | S    |
| 7D   | Rm 5 / A    | Floor             | 12 x 12                   | 14.0                                     | H    |
| 8D   | Rm 5 / D    | Sill              | 4 1/4 x 32                | < 5.00                                   | S    |
| 9D   | Common / D  | Floor             | 12 x 12                   | 12.1                                     | H    |
| 10D  | Common / D  | Sill              | 4 3/4 x 33                | 115                                      | H    |
| 11D  |             | Blank             |                           | < 5.00                                   |      |
|  |             |                   |                           |  |      |
|  |             |                   |                           |  |      |
|  |             |                   |                           |  |      |
|  |             |                   |                           |  |      |
|  |             |                   |                           |  |      |
| <b>KEY: S = Lead-Safe      H = Lead-Hazard</b><br>*minimum 16 square inches; maximum 2 square feet |             |                   |                           |  |      |

Comments:

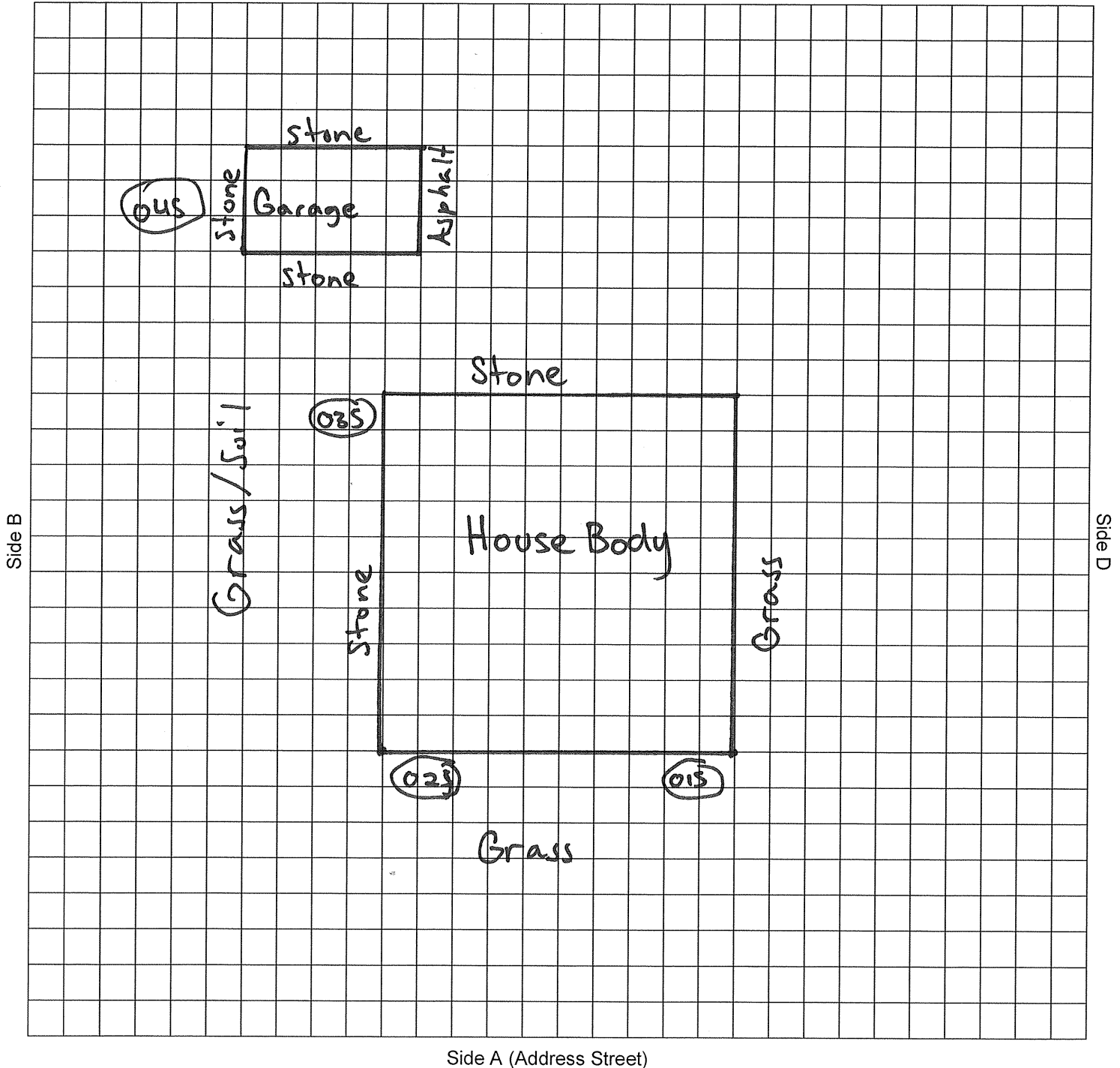
Initials KLO Date 02/27/24



FLOOR PLAN/PROPERTY SKETCH (GRID)

Street Address: 1 Transit St. Unit: 2R City: Woonsocket

Side C



Side A (Address Street)

Initials KLO Date 02/27/24



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

page 12 of 21

Street Address: 1 Transit St.

Unit: 2R City: Woonsocket

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

Common Hallway

| Surface               | Side | Pb   | Condition | Lead | Remedy |
|-----------------------|------|------|-----------|------|--------|
| Ceiling               |      | 0.0  |           |      |        |
| Crown Molding         | X    |      |           |      |        |
| Wall <u>Upper</u>     | A    | 0.1  |           |      |        |
| Wall                  | B    | 0.0  |           |      |        |
| Wall                  | C    | 0.0  |           |      |        |
| Wall                  | D    | 0.0  |           |      |        |
| Chair Rail            | All  | 0.0  |           |      |        |
| Baseboard             | X    |      |           |      |        |
| Radiator              | X    |      |           |      |        |
| Floor                 |      | COV  | I         | C    |        |
| Door <u>1st Floor</u> | All  | 0.1  |           |      |        |
| Door Casing           | I    | 0.0  |           |      |        |
| Door Jamb             | I    | 0.1  |           |      |        |
| Threshold             | I    | 0.0  |           |      |        |
| Door <u>2nd Floor</u> | A    | 0.0  |           |      |        |
| Door Casing           | I    | 1.3  | I         | C    |        |
| Door Jamb             | I    | 0.0  |           |      |        |
| Threshold             | I    |      | N         |      |        |
| Door <u>2nd Floor</u> | C/D  | P78  |           |      |        |
| Door Casing           | I    | 0.0  |           |      |        |
| Door Jamb             | I    | 0.0  |           |      |        |
| Threshold             | I    |      | N         |      |        |
| Door <u>3rd Floor</u> | A    | 10.0 | I         | C    |        |
| Door Casing           | I    | 4.1  | I         | C    |        |
| Door Jamb             | I    | 5.6  | I         | C    |        |
| Threshold             | I    | 2.8  | I         | C    |        |
| Closet Door           | X    |      |           |      |        |
| Closet Casing         | X    |      |           |      |        |
| Closet Jamb           | X    |      |           |      |        |
| Closet Ceiling        | X    |      |           |      |        |
| Closet Wall           | X    |      |           |      |        |
| Closet Shelf          | X    |      |           |      |        |
| Shelf Support         | X    |      |           |      |        |
| Closet Pole           | X    |      |           |      |        |
| Wall Casing           | All  | 0.0  |           |      |        |
| Lower Wall            | All  | 0.0  |           |      |        |

| Surface        | Side | Pb  | Condition | Lead | Remedy |
|----------------|------|-----|-----------|------|--------|
| 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    |     |           |      |        |
| 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    |     |           |      |        |
| Handrail       |      | 0.0 |           |      |        |
| Newell Post    |      | 0.0 |           |      |        |
| Stair Tread    |      | 0.0 |           |      |        |
| Stair Riser    |      | 0.1 |           |      |        |
| Baluster       |      | 0.0 |           |      |        |
| Stringer       |      | 0.0 |           |      |        |

XRF: Positive  $\geq 1.0$  mg/cm<sup>2</sup>, Test Kit "+", or "AP" = Assumed Positive; Negative  $< 1.0$  mg/cm<sup>2</sup> or "78" = Post-1978  
 Condition: N = No Paint; I = Intact; D = Damaged; AD = Assumed Damaged; B = Binding or Friction  
 S = Lead-Safe; C = Conditionally Lead-Safe (Positive/Intact); H = Lead-Hazard (Positive/Damaged) Remedy: COV = Covered; MI = Made Intact; REM = Removed; REP = Replaced

Initials KLO Date 02/27/24



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

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Street Address: 1 Transit St.

Unit: 2B City: Woonsocket

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

Common Hallway (cont.)

| Surface        | Side | Pb   | Condition | Lead | Remedy |
|----------------|------|------|-----------|------|--------|
| Ceiling        | X    |      |           |      |        |
| Crown Molding  | X    |      |           |      |        |
| Wall           | X    |      |           |      |        |
| Wall           | X    |      |           |      |        |
| Wall           | X    |      |           |      |        |
| Wall           | X    |      |           |      |        |
| Chair Rail     | X    |      |           |      |        |
| Baseboard      | X    |      |           |      |        |
| Radiator       | X    |      |           |      |        |
| Floor          | X    |      |           |      |        |
| Door 3rd Floor | B    | 0.0  |           |      |        |
| Door Casing    | I    | 3.7  | I         |      |        |
| Door Jamb      | I    | 10.0 | D         | H    |        |
| Threshold      | I    | 1.1  | D         | H    |        |
| Door           | C    | 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    | 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 |
|----------------|------|----|-----------|------|--------|
| 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    |    |           |      |        |
| 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    |    |           |      |        |
| Handrail       | X    |    |           |      |        |
| Newell Post    | X    |    |           |      |        |
| Stair Tread    | X    |    |           |      |        |
| Stair Riser    | X    |    |           |      |        |
| Baluster       | X    |    |           |      |        |
| Stringer       | X    |    |           |      |        |

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

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

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Initials KLO Date 02/27/24



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

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Street Address: 1 Transit St.

Unit: 2B City: Woonsocket

Primary Structure: House Body

| Surface        | Side | XRF | Condition | Lead | Remedy |
|----------------|------|-----|-----------|------|--------|
| Siding         | A11  | COV | I         | C    |        |
| Corner Board   | A11  | COV | I         | C    |        |
| Upper Trim     | A11  | COV | I         | C    |        |
| Lower Trim     | A11  | COV | I         | C    |        |
| Storm Door     | X    |     |           |      |        |
| Door           | A11  | P78 |           |      |        |
| Door Casing    | I    | O.O |           |      |        |
| Door Jamb      | I    | O.O |           |      |        |
| Threshold      | I    |     | N         |      |        |
| Kick Plate     | ↓    | COV | I         | C    |        |
| Storm Door     | X    |     |           |      |        |
| Door           | X    |     |           |      |        |
| Door Casing    | X    |     |           |      |        |
| Door Jamb      | X    |     |           |      |        |
| Threshold      | X    |     |           |      |        |
| Door Kickplate | X    |     |           |      |        |
| Storm Door     | X    |     |           |      |        |
| Door           | X    |     |           |      |        |
| Door Casing    | X    |     |           |      |        |
| Door Jamb      | X    |     |           |      |        |
| Threshold      | X    |     |           |      |        |
| Kick Plate     | X    |     |           |      |        |
| Overhang       | X    |     |           |      |        |
| Column         | X    |     |           |      |        |
| Newel Post     | X    |     |           |      |        |
| Railing Cap    | A11  |     | N         |      |        |
| Baluster       | A11  |     | N         |      |        |
| Lower Rail     | A11  |     | N         |      |        |
| Handrail       | A11  | O.O |           |      |        |
| Tread          |      |     | N         |      |        |
| Riser          |      |     | N         |      |        |
| Stringer       | A11  |     | N         |      |        |
| Lattice        | A11  | O.O |           |      |        |
| Oil Fill       | C    | O.O |           |      |        |
| Flower Pots    | A11  | O.O |           |      |        |

| Surface            | Side | XRF | Condition | Lead | Remedy |
|--------------------|------|-----|-----------|------|--------|
| Window Sill        | A11  | COV | I         | C    |        |
| Window Casing      | I    | COV | I         | C    |        |
| Window Sash        | ↓    |     | N         |      |        |
| 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     | X    |     |           |      |        |
| Fire Escape        | A11  | O.O |           |      |        |
| BA Window Sill     | A11  | O.O |           |      |        |
| BA Window Sash     | I    |     | N         |      |        |
| BA Window Frame    | ↓    | O.O |           |      |        |
| BA Screen Frame    | ↓    |     | N         |      |        |
| BA Window Sill     | X    |     |           |      |        |
| BA Window Sash     | X    |     |           |      |        |
| BA Window Frame    | X    |     |           |      |        |
| BA Screen Frame    | X    |     |           |      |        |
| BA Window Sill     | X    |     |           |      |        |
| BA Window Sash     | X    |     |           |      |        |
| BA Window Frame    | X    |     |           |      |        |
| BA Screen Frame    | X    |     |           |      |        |
| BA Window Sill     | X    |     |           |      |        |
| BA Window Sash     | X    |     |           |      |        |
| BA Window Frame    | X    |     |           |      |        |
| BA Screen Frame    | X    |     |           |      |        |
| Foundation         | A11  | O.O |           |      |        |
| Bulkhead           | C    | O.O |           |      |        |
| Drain Pipe         | A11  | O.O |           |      |        |
| Electrical Conduit | X    |     |           |      |        |
| Lamp Post          | X    |     |           |      |        |
| Fence              | A11  | O.O |           |      |        |

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Initials KLO Date 02/27/24









Street Address: 1 Transit St.

City: Woonsocket

Unit: 2R

Accessory Structure: Garage

Accessory Structure: \_\_\_\_\_

[illegible][illegible]

**XRF: Positive  $\geq 1.0$  mg/cm<sup>2</sup>, Test Kit "+", or "AP" = Assumed Positive; Negative  $< 1.0$  mg/cm<sup>2</sup> or "78" = Post-1978 Condition: N = No Paint; I = Intact; D = Damaged; AD = Assumed Damaged; B = Binding or Friction S = Lead-Safe; C = Conditionally Lead-Safe (Positive/Intact); H = Lead-Hazard (Positive/Damaged) Remedy: COV = Covered; MI = Made Intact; REM = Removed; REP = Replaced**

Initials **KLO** Date **02/27/24**



## SOIL INSPECTION

Street Address: 1 Transit St. Unit: 2R City: WoonsocketSampling Date: 02/27/24 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<br>(ft. or in) | Depth<br>(ft. or in) | Bare<br>(Y or N) | Result<br>(ppm) | Lead |
|--|-------------------|------|-------------------------|----------------------|------------------|-----------------|------|
| 1S   | Primary           | A    | < 3 ft.                 | 1 in.                | Y                | 576             | H    |
| 2S   | Primary           | A    | < 3 ft.                 | 1 in.                | Y                | 939             | H    |
| 3S   | Primary           | B    | < 4 ft.                 | 1 in.                | Y                | 437             | H    |
|  | Primary           | C/D  |                         |                      | N                |                 | C    |
| 4S   | Play Area         | B    | 15 ft.                  | 1 in.                | Y                | 49.3            | S    |
|  | Mid Yard          |      |                         |                      |                  |                 |      |
|  | Garage            |      |                         |                      |                  |                 |      |
|  | Shed              |      |                         |                      |                  |                 |      |
|  | Fence             |      |                         |                      |                  |                 |      |
|  | Play Equipment    |      |                         |                      |                  |                 |      |
|  | Outdoor Furniture |      |                         |                      |                  |                 |      |
|  | Other             |      |                         |                      |                  |                 |      |
|  |                   |      |                         |                      |                  |                 |      |
|  |                   |      |                         |                      |                  |                 |      |
|  |                   |      |                         |                      |                  |                 |      |
| KEY: S = Lead-Safe C = Conditionally Lead-Safe (covered) H = Lead-Hazard |                   |      |                         |                      |                  |                 |      |

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

## Comments:

\* 1S collected from under the deck.  
4S is 15ft. from the garage.

Initials KLO Date 02/27/24