

Sample Renovation Recordkeeping Checklist

Form Approved OMB No. 2070-0195 Expires 1/31/21

Name of Firm: _____

Date and Location of Renovation: _____

Brief Description of Renovation: _____

Name of Assigned Renovator: _____

Name(s) of Trained Worker(s), if used: _____

Name of Dust Sampling Technician,
Inspector, or Risk Assessor, if used: _____

____ Copies of renovator and dust sampling technician qualifications (training certificates, certifications) on file.

____ Certified renovator provided training to workers on (check all that apply):

____ Posting warning signs ____ Setting up plastic containment barriers

____ Maintaining containment ____ Avoiding spread of dust to adjacent areas

____ Waste handling ____ Post-renovation cleaning

____ Test kit or test results from an EPA-recognized laboratory on collected paint chip sample, used by certified renovator to determine whether lead was present on components affected by renovation (identify method used, type of test kit used (if applicable), laboratory used to conduct paint chip analysis, describe sampling locations and results):

____ Warning signs posted at entrance to work area.

____ Work area contained to prevent spread of dust and debris

____ All objects in the work area removed or covered (interiors)

____ HVAC ducts in the work area closed and covered (interiors)

____ Windows in the work area closed (interiors)

____ Windows in and within 20 feet of the work area closed (exteriors)

____ Doors in the work area closed and sealed (interiors)

____ Doors in and within 20 feet of the work area closed and sealed (exteriors)

____ Doors that must be used in the work area covered to allow passage but prevent spread of dust

____ Floors in the work area covered with taped-down plastic (interiors)

____ Ground covered by plastic extending 10 feet from work area—plastic anchored to building and weighed down by heavy objects (exteriors)

____ Vertical containment installed if property line prevents 10 feet of ground covering, or if necessary to prevent migration of dust and debris to adjacent property (exteriors)

____ Waste contained on-site and while being transported off-site.

____ Work site properly cleaned after renovation

____ All chips and debris picked up, protective sheeting misted, folded dirty side inward, and taped for removal

____ Work area surfaces and objects cleaned using HEPA vacuum and/or wet cloths or mops (interiors)

____ Certified renovator performed post-renovation cleaning verification (describe results, including the number of wet and dry cloths used): _____

____ If dust clearance testing was performed instead, attach a copy of report

____ I certify under penalty of law that the above information is true and complete.

Name and title

Date

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