U. S. ENVIRONMENTAL PROTECTION AGENCY

NOTIFICATION

OF LEAD-BASED PAINT ABATEMENT ACTIVITIES

Important: A representative of the certified firm may complete this sample form or a similar form when notifying EPA. Consult the *Instructions for Notifying EPA Commencement of Lead-Based Paint Abatement Activities* when preparing abatement notification. **Please type or print responses in black or blue ink only.**

A. Type of Notification Please indicate the type of notification.

☐ Original ☐ Updated ☐ Cancellation

B. Emergency Notification ☐ No ☐ Yes, if yes include documentation showing evidence of an EBL determination or a copy of the Federal/State/Tribal/Local emergency abatement order.

C. Activity Start and End Dates Specify the dates you will begin and end lead-based paint activity.

If necessary, estimate end date using your best professional judgment.

Start date: _____ (Month/Day/Year) End date: _____ (Month/Day/Year)

D. Description of Activity This section relates to the building where abatement work will be performed.

Type of Building: ☐ Single Family Dwelling ☐ Multi-Family Dwelling ☐ Child-Occupied Facility

Property name (if applicable): _____

Property Address including apartment and/or unit number(s):

_____
Street Address City State Zip Code

Square footage/acreage to be abated: _____

Please write a brief description of abatement project to be performed. (Enclose additional paper if necessary)

E. Firm Information

Name: _____ Firm's Certification Number: _____

Address: _____
Street Address City State Zip Code

Phone Number: _____

F. Certified Supervisor's Information

Name: _____

EPA Certification Number: _____ (Check here ☐ if working under interim certification and enter the identification number from your course completion certificate in this space)

G. Firm Affirmation Please note that this form is incomplete without a signature.

I hereby attest and affirm that the information included on this notification form is true and accurate to the best of my belief and knowledge. I acknowledge that any approval authorized pursuant to this notification will be subject to revocation if issuance was based on incorrect or inadequate information that materially affected the decision to issue the approval.

Name: _____ Title: _____

Signature:_____ Date Signed: _____

For information on EPA and other lead programs, see the web site:
http://www.epa.gov/lead/