

Building Permit or Minimum Housing Code Violations Lead-Based Paint Certified Renovator Requirements

If someone will be getting paid to do work that disturbs painted surfaces in a pre-1978 residence or child-occupied facility, then the work may need to follow additional regulations in respect to lead-based paint.

Answer the following questions:

	Place a check in this column if this answer is correct	Place a check in this column if this answer is correct	
Is this a residence or Child-Occupied Facility, for example, a child care center?	Yes	No	
Is this a zero-bedroom dwelling (studio apartment, dormitory, hotel, hospital)?	No	Yes	
When was the structure initially built?	On or before 12/31/1977	On or after 1/1/1978	
Is the owner doing the work in his or her own home (not paying anyone else) and there is not a child-occupied facility in the same unit?	No – the owner is paying someone else or collecting rent; or No – there is a child-occupied facility in the residential unit.	Yes – the owner is not paying someone else to conduct the work and there is no child-occupied facility in the residential unit.	
Has lead-based paint been identified by a Certified Renovator or Risk Assessor/Inspector?	Yes – lead-based paint was identified; or No- a prior inspection has not been conducted.	The components that are going to be removed, remodeled, renovated or otherwise disturbed do not have lead-based paint (provide documentation).	
Is this a minor repair or maintenance (disturbing less than 6 square feet of painted surfaces per room or interior work or less than 20 square feet of painted surface for exterior activities)?	No, this is not a minor repair OR Yes, this is a minor repair but includes window replacement, demolition, the use of open-flame burning or torching, machine removal of paint (sanding, grinding, power planning, needle gun, abrasive blasting, sandblasting), or the use of a heat gun set over 1100 ⁰ F.	Yes this is a minor repair and does not include window replacement, demolition, the use of open-flame burning or torching, machine removal of paint (sanding, grinding, power planning, needle gun, abrasive blasting, sandblasting), or the use of a heat gun set over 1100 ⁰ F.	
Results:	If <u>all</u> the answers are in this column and <u>none</u> are in the next column, The person doing the work must be a NC Certified Renovator associated with a NC Certified Firm.	If <u>any</u> answers are in this column, The person doing the work has no additional requirements in regards to lead-based paint.	

Certified Renovator: _____ Renovator Number _____

Certified Firm: _____ Firm Number _____

Site Address: _____

Are Federal funds provided for this property?* Yes No

*Properties with Federal funds and/or Lead Abatements have additional requirements

Working Together For Your Health
 Craven County Health Department ☞ 2818 Neuse Blvd ☞ PO Drawer 12610 ☞ New Bern, NC 28561
envhealth@cravncountync.gov (252) 636-4936 www.cravncountync.gov

Craven County Health Department RRP Documentation



Certified Renovator: _____ Renovator Number _____

Certified Firm: _____ Firm Number _____

Site Address: _____

Yes No

The Certified Renovator / Firm have provided the “NC Lead-Based Paint Program for Renovation, Repair, and Painting Guidance Document – Recordkeeping Checklist” and supporting documentation; accuracy of the documentation has not been evaluated.

Yes No

The Environmental Health Section - Craven County Health Department has conducted a visual assessment and there is no visible debris, paint chips or residue on surfaces in or below the work area.

(signature)

Date

Debra Yarbrough, REHS

(print name)

Instructions

- The person who is getting the permit or doing the work because of a minimum housing code violation should present copies of their Certified Renovator and the Certified Firm certificates issued by the NC Health Hazards Control Unit. A list of Certified Firms can be accessed at the NC Health Hazards Control Unit website: <http://www.schs.state.nc.us/lead/accredited.cfm>
- If they are not a Certified Renovator associated with Certified Firm, then they can find out how to become certified (training and registration with the state) by contacting the
 - Craven County Health Department – Environmental Health Section at 252 636-4936 / envhealth@cravencountync.gov ; or
 - NC Health Hazards Control Unit at 919 707-5950 / <http://epi.publichealth.nc.gov/lead/rrp.html> .

Once the work is complete, the Certified Renovator should present the *NC Lead-Based Paint Program for Renovation, Repair, and Painting Guidance Document – Recordkeeping Checklist* (<http://epi.publichealth.nc.gov/lead/forms.html>).

1. Contractor completes front page of this form. If all of the boxes in the left column are chosen and none in the right
 - a. Certified Renovator marks whether or not the site or the renovation is funded by federal funds, for example, HUD, Coastal Community Action, CDBG, etc. There are additional requirements if federal funds are involved. The grantor should enforce these additional requirements.
 - b. If there is no Certified Renovator or Certified Firm, office staff sends the information about the proposed work to the Craven County Health Department. The requirement that the contractor be a Certified Renovator is the NC Health Hazards Control Unit’s to enforce. The Health Department will report to NC HHCU for enforcement.
2. Completion of the Job
 - a. Jobs requiring a Certified Renovator / Firm will complete the “NC Lead-Based Paint Program for Renovation, Repair, and Painting Guidance Document – Recordkeeping Checklist”.
 - b. Certified Renovator / Firm will submit the Checklist and supporting documentation to the Environmental Health Section of the Craven County Health Department (EHS-CCHD).
 - c. The EHS-CCHD will review for completeness and may conduct on-site visual assessment. The completed Checklist and supporting documentation will be sent to the City of New Bern Building Inspections Department.
 - d. Violations will be reported to the NC HHCU for enforcement.

NC Lead-Based Paint Program for Renovation, Repair, and Painting Guidance Document - Recordkeeping Checklist

Project Date(s): _____ Project/Job Number: _____

Target Housing Child-Occupied Facility (COF) Year Built: _____

Name of Owner/Occupant: _____

Complete Address of Owner: _____

Physical Address of Renovation (If Different): _____

Description of Renovation or Scope of work (attach a copy if available): _____

If an emergency renovation, describe the nature of the emergency and document the provisions of the NC-RRP Rules that were not followed: _____

Name of NC Certified Lead Renovation Firm: _____

NC Certified Lead Renovation Firm Number: (Example: RRP-124) _____ (Attach Copy of Firm Certificate)

Name of NC Certified Lead Renovator Assigned to Project: _____

NC Certified Lead Renovator Number: (Example: 172469) _____ (Attach Copy of Renovator Letter)

NC Certified Lead Renovator provided lead safe training to workers on (mark all that apply):

____ Posting Warning Signs (Occupant Protection)

____ Setting Up & Maintaining Containment(s) / Interior / Exterior

____ Using Personal Protection Equipment ____ Prohibited & Restricted Work Practices

____ Isolate Work Area, Remove or Cover Objects, Close Windows/Doors, Close & Cover Duct Openings, Cover Floors or Ground (Avoid Spreading of Lead Dust to Adjacent Areas)

____ Post-Renovation Cleaning (Interior/Exterior) ____ Waste Handling

Other _____

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

_____, _____, _____,
_____ (Attach list if needed)

Pre-Renovation Education - (select method used):

____ Obtained written acknowledgment of receipt of pamphlet - Attached "Renovate Right pamphlet - Pre-Renovation Form" with signature of owner/occupant and renovator or renovator's self-certification (for tenant-occupied dwelling only) prior to starting work **OR**,

____ Documented certificate of mailing at least 7 days prior to starting renovation but no earlier than 60 days prior to starting work **OR**,

____ For Child-Occupied Facility (COF) or common area renovations, posted pamphlet & information signs with general nature of work, location of work, start and completion dates and how parents & guardians can review or obtain a copy of the Renovate Right pamphlet, project records and reports at no cost. Firm prepared signed & dated statement describing steps to inform all parents & guardians of intended renovation.

NC Lead-Based Paint Program for Renovation, Repair, and Painting Guidance Document - Recordkeeping Checklist (Page 2 of 4)

Lead-Based Paint (LBP) Testing or Inspection Results:

Painted or coated surfaces are assumed to contain Lead-Based Paint (LBP) unless tested.

I. Check if Assumed LBP N/A

II: Was a LBP inspection or written determination done by a NC Certified Lead Inspector/Risk Assessor?

Yes N/A (If yes, attach a copy of the inspection report or written determination)

III. Did a NC certified renovator test for lead using an EPA recognized test kit? Yes N/A

If yes, you must provide LBP testing results in writing to owner or occupant **prior** to starting work.

Results provided to owner: Yes N/A Date provided _____

Record testing results below. Use supplemental sheets to record additional testing results if needed.

Renovator Testing:

EPA – Recognized Lead Test Kit Documentation

Name of Kit Used: _____ Serial/Lot Number: _____ Expiration Date: _____ (if applicable)

List the Room Location(s), All Component(s) and the Results of each test.

Date	Sample No.	Room	Component	LBP: Yes or No

Paint Chip Sampling Documentation

List the Room Location(s), All Component(s) and the Results of the testing. LBP is 0.50% (5000 PPM) or Greater. Usually minimum 1 square inch (in²) sample needed, check with NLLAP laboratory.

Date	Sample No.	Room	Component	Dimension (inches)	Area (in ²)	LBP: Yes or No

Note: Attach copy of analysis results from NLLAP laboratory

(Find NLLAP labs at: <http://www2.epa.gov/lead/national-lead-laboratory-accreditation-program-list>)

NC Lead-Based Paint Program for Renovation, Repair, and Painting Guidance Document - Recordkeeping Checklist (Page 3 of 4)

Project Date: _____ Project/Job Number: _____

Physical Address of Renovation: _____

Mark All That Apply

General Work Practices:

- Warning signs posted at entrance to work area
- Work area contained to prevent spread of dust and debris
- Work site properly cleaned after renovation
- Personal Protective Equipment (used as needed - disposable suits/booties, etc.)
- Washing station provided (face and hand washing)
- At the conclusion of each work day, waste contained on-site is stored to prevent access and release of dust or debris. Waste contained while being transported off-site.

Interior work:

- All objects in the work area removed or covered with plastic with edges/seams sealed
- Ducts (e.g., HVAC, etc.) in the work area closed, covered with plastic and sealed
- Windows in the work area closed
- Doors in the work area closed and sealed
- Doors used to enter the work area are covered to allow passage of workers, but prevent spread of dust
- Floors in the work area covered with taped-down plastic, minimum 6 feet from renovated surface
- Work area surfaces and objects cleaned using HEPA vacuum and/or wet cloths or mops

Exterior Work:

- Closed windows and doors in and within 20 feet of the work area
- Doors used to enter the work area are covered to allow passage of workers, but prevent spread of dust
- Ground covered by plastic sheeting extending 10 feet or more from work area – plastic sheeting anchored to building and edges weighed down
- 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
- All chips and debris picked up, protective sheeting misted, folded dirty side inward, and taped for removal

NC Lead-Based Paint Program for Renovation, Repair, and Painting Guidance Document - Recordkeeping Checklist (Page 4 of 4)

Cleaning Verification (CV) Documentation - Refer to EPA CV Card for Steps (Use supplemental sheets to record additional CV results if needed)

Exterior: Visual Inspection: Date Passed: _____ N/A: _____ No exterior work conducted

Note: In order to pass an exterior visual inspection there can't be any visible debris, paint chips or residue on surfaces in or below the work area.

Interior: Visual Inspection: Date Passed: _____ N/A: _____ No interior work conducted

Note: In order to pass an interior visual inspection there can't be any visible debris, paint chips or residue on any surfaces, including all objects and surfaces in the work area and within two feet of the work area. For interior work use the appropriate number of wet/dry wipe(s) for **each window sill, uncarpeted floor and countertop** surface inside the work area. List each of the areas or rooms (ex. bedroom, living room, hallway, etc.) where cleaning verification was performed in the following table(s). If dust clearance was performed in lieu of cleaning verification, attach a copy of the results.

(Example) Interior Cleaning Verification	Area/Room	Mark column Pass (P), Fail (F) or Not Applicable (N/A) or leave blank		
	<i>Kitchen</i>	First Wipe	* Second Wipe	*Dry Wipe
Number of Window Sills	2	S1-Pass S2-Fail	S2-Pass	N/A
**Number & Size Uncarpeted Floors	1 **(48 ft ²)	F1-P (24 ft ²) F2-P (24 ft ²)	N/A	
Number of Countertops	2	C1-P C2-F	C2-F	C2-P
*** Other Surfaces	Pantry shelving	P		
Date Completed		3/4/2014	3/5/2014	3/5/2014

Interior Cleaning Verification	Area/Room	Mark column Pass (P), Fail (F) or Not Applicable (N/A) or leave blank		
		First Wipe	* Second Wipe	*Dry Wipe
Number of Window Sills				
**Number & Size Uncarpeted Floors				
Number of Countertops				
*** Other Surfaces				
Date Completed				

Example: S1 represents 1st sill wiped, S2 represents 2nd sill wiped, F1 represents 1st surface wipe on floor and so on.

***Second wet wipe (if needed) conducted only after re-cleaning the failed work area(s). Dry wipe (if needed) used only after second wet wipe failure and after re-cleaning the failed work area. Allow surface to dry or wait 1 hour (whichever is longer) before performing dry wipe.**

****For surface areas greater than 40 ft², divide the area roughly into equal sections (each area less than 40 ft²) and use a separate wipe for each area.**

***** Other surfaces the renovator may choose to perform CV on, but are not required by regulatory work practice.**

Note: The NC certified lead renovation firm is required to submit a copy of information, documenting compliance, to the owner or occupant, "at no cost", upon final invoice or within 30 days after completing the renovation. Date when a copy of records were provided to owner or occupant: _____

I certify that the information provided on this checklist is true and complete:

Name and title NC Certified Renovator

Date

Disclaimer: The information reflected on this recordkeeping checklist is provided as a resource tool only and the checklist itself is not required to be used. It is subject to change without notice. The information contained in this or future versions are not intended to be all inclusive and should not be interpreted as such. All applicable renovation activities must comply with the North Carolina General Statutes §130A-453.22-453.31 and the rules adopted to implement the Lead-Based Paint Hazard Management Program for Renovation, Repair and Painting (LHMP-RRP) 10A NCAC 41C .0900. For questions regarding the LHMP-RRP, contact the Health Hazards Control Unit at (919) 707-5950 or visit our website at: <http://epi.publichealth.nc.gov/lead/lhmp.html>.

**NC Lead-Based Paint Program for Renovation, Repair and Painting
(SUPPLEMENTAL SHEET) Guidance Document - Recordkeeping Checklist (Page 2)**

Project Date: _____

Project/Job Number: _____

Project Address: _____

Name NC Certified Lead Renovator: _____ NC Certified Lead Renovator No.: 17- _____

Cleaning Verification (CV) Documentation (Refer to EPA CV card for Steps)

Exterior: Visual Inspection: Date Passed: _____ N/A: _____ No exterior work conducted

Note: In order to pass an exterior visual inspection there can't be any visible debris, paint chips or residue on surfaces in or below the work area.

Interior: Visual Inspection: Date Passed: _____ N/A: _____ No interior work conducted

Note: In order to pass an interior visual inspection there can't be any visible debris, paint chips or residue on any surfaces, including all objects and surfaces in the work area and within two feet of the work area. For interior work use the appropriate number of wet/dry wipe(s) for **each window sill, uncarpeted floor and countertop** surface inside the work area. List each of the areas or rooms (ex. bedroom, living room, hallway, etc.) where cleaning verification was performed in the following table(s). If dust clearance was performed in lieu of cleaning verification, attach a copy of the results.

Interior Cleaning Verification	Area/Room	Mark column Pass (P), Fail (F) or Not Applicable (N/A) or leave blank			Interior Cleaning Verification	Area/Room	Mark column Pass (P), Fail (F) or Not Applicable (N/A) or leave blank		
		First Wipe	Second Wipe	Dry Wipe			First Wipe	Second Wipe	Dry Wipe
Number of Window Sills					Number of Window Sills				
Number & Size Uncarpeted Floors					Number & Size Uncarpeted Floors				
Number of Countertops					Number of Countertops				
**Other Surfaces					** Other Surfaces				
Date Completed					Date Completed				

Interior Cleaning Verification	Area/Room	Mark column Pass (P), Fail (F) or Not Applicable (N/A) or leave blank			Interior Cleaning Verification	Area/Room	Mark column Pass (P), Fail (F) or Not Applicable (N/A) or leave blank		
		First Wipe	Second Wipe	Dry Wipe			First Wipe	Second Wipe	Dry Wipe
Number of Window Sills					Number of Window Sills				
Number & Size Uncarpeted Floors					Number & Size Uncarpeted Floors				
Number of Countertops					Number of Countertops				
** Other Surfaces					**Other Surfaces				
Date Completed					Date Completed				

** Other surfaces the renovator may choose to perform CV on, but are not required by regulatory work practice.