

<b>Guide for Review of Lead-Based Paint Compliance in Properties Receiving Tenant-Based Rental Assistance (TBRA)</b>			
<b>Name of Program Participant:</b>			
<b>Program Participant Staff Consulted:</b>			
<b>Name of HUD Grant Program(s) Reviewed:</b>			
<b>Owner Name and Address of Assisted Project:</b>		<b>Date Funds Awarded:</b>	
<b>Name(s) of HUD Reviewer(s):</b>		<b>Date of Review:</b>	

**NOTE:** All questions that address requirements contain the citation for the source of the requirement (statute, regulation, NOFA, or grant agreement). If the requirement is not met, HUD must make a finding of noncompliance. All other questions (questions that do not contain the citation for the requirement) do not address requirements, but are included to assist the reviewer in understanding the participant's program more fully and/or to identify issues that, if not properly addressed, could result in deficient performance. Negative conclusions to these questions may result in a "concern" being raised, but not a "**finding**."

**Instructions:** This Exhibit is designed to evaluate compliance with lead hazard requirements applicable to CPD programs that provide Tenant-Based Rental Assistance (TBRA). This Exhibit is divided into three sections:

- Section A , Program Review, for reviewing the program's overall compliance;
- Section B, File Reviews, for reviews of requirements applicable to all projects; and
- Section C, for a summary listing of any identified findings or concerns.

Information on LBP sampling guidance and developing corrective actions is given in Chapter 24, Section 24-6. Copies of monitoring reports addressing lead-based paint, including completed Exhibits, are to be sent to the Office of Healthy Homes and Lead Hazard Compliance, per Section 24-6 of the introduction to this Chapter.

**Questions:**

A. PROGRAM REVIEW

1.

Does the program consistently and accurately assess units for the applicability of the Lead Safe Housing Rule and document exemptions? [24 CFR 35.115 - Exemptions; 24 CFR 35.1200(b) - Applicability to TBRA units with child under age six]	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Yes</b>	<b>No</b>
<b>Describe Basis for Conclusion:</b>		

2.

Do participating jurisdictions consistently provide copies of the Lead Hazard Information Pamphlet to occupants of assisted households? [24 CFR 35.1210(b)]	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>
<b>Describe Basis for Conclusion:</b>		

3.

Does the program conduct visual assessments for deteriorated paint in all units covered by the Lead Safe Housing Rule? [24 CFR 35.1215(a)]	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>
<b>Describe Basis for Conclusion:</b>		

4.

Based on your review, were workers trained or supervised and did workers use lead-safe work practices on work larger than <i>de minimis</i> amounts (e.g., on-site reviews during work or a signed certification by the contractor)? (Note that intent to use such practices does not satisfy this requirement.) [24 CFR 35.1215(b); 24 CFR 35.1330(a)(4); 24 CFR 35.1350(d)]	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>
<b>Describe Basis for Conclusion:</b>		

5.

Is clearance consistently performed and passed after paint stabilization on projects larger than <i>de minimis</i> amounts? [24 CFR 35.1215(b)]	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>
<b>Describe Basis for Conclusion:</b>		

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6.

Is the Notice of Lead Hazard Reduction consistently provided to assisted households within 15 days after the work? [24 CFR 35.1215(c)]	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>
<b>Describe Basis for Conclusion:</b>		

7.

Does the program ensure that owners of units (occupied by one or more children under age six) incorporate ongoing lead-based paint maintenance activities into regular building operations?? [24 CFR 35.1220]	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>
<b>Describe Basis for Conclusion:</b>		

8.

Does the program take appropriate action when a child with an environmental intervention blood lead level is identified? [24 CFR 35.1225]	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>
<b>Describe Basis for Conclusion:</b>		

9.

Does the program share housing data with the local health department on a quarterly basis in an attempt to match assisted unit addresses with lead-poisoned children? [24 CFR 35.1225(f)]	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>
<b>Describe Basis for Conclusion:</b>		

10.

Does the program have staff who are knowledgeable about HUD’s lead-based paint regulations?	<input type="checkbox"/> <input type="checkbox"/> <b>Yes</b> <b>No</b>
<b>Describe Basis for Conclusion:</b>  	

11.

Does the program ensure that applicants are not being denied assistance or services based on familial status or disability and that pre-1978 homes of families with children less than age six are being inspected and treated for lead hazards when triggered by the regulation? NOTE: The Fair Housing Act prohibits denial of services based on familial status (presence of children under age 18) or disability. [24 CFR 100.50(b)(2); 24 CFR 35.1215]	<input type="checkbox"/> <input type="checkbox"/> <b>Yes</b> <b>No</b>
<b>Describe Basis for Conclusion:</b>  	

B. FILE REVIEW

<b>Name of Program Participant or Entity Providing the Assistance:</b>  
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12.

Was this project evaluated for applicability of the Lead Safe Housing Rule? (If the response is “yes” AND the project meets the regulatory exemption standards, STOP HERE. If “yes” and the project is <u>not</u> exempt, continue with the remaining questions in this Section.) [24 CFR 35.115]	<input type="checkbox"/> <input type="checkbox"/> <b>Yes</b> <b>No</b>
<b>Describe Basis for Conclusion:</b>  	

13.

<p>In units that are not otherwise exempt, the LBP requirements for Tenant-Based Rental Assistance apply only to units with children under age six and common areas servicing those units.</p> <ul style="list-style-type: none"> <li>Based on your review, is there evidence of occupancy in the assisted household by a child under age six or evidence such a child is expected to reside there? Note: If there is no child under age six residing or expecting to reside there, stop the file review at this point.</li> <li>If there is a child under age six residing there, or such a child is expected to reside there, the unit is covered by the rule. Continue with the remaining questions in this Section.)</li> </ul> <p>[24 CFR 35.1200(b)]</p>	<table border="0"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><b>Yes</b></td> <td><b>No</b></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Yes</b>	<b>No</b>
<input type="checkbox"/>	<input type="checkbox"/>				
<b>Yes</b>	<b>No</b>				
<p><b>Describe Basis for Conclusion:</b></p>					

14.

<p>Is there documentation in the file that visual assessments of the unit for deteriorated paint were performed at the initial and periodic inspections (e.g., HUD inspection form, visual assessment report or field notes)?</p> <p>[24 CFR 35.1215(a)]</p>	<table border="0"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><b>Yes</b></td> <td><b>No</b></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Yes</b>	<b>No</b>
<input type="checkbox"/>	<input type="checkbox"/>				
<b>Yes</b>	<b>No</b>				
<p><b>Describe Basis for Conclusion:</b></p>					

15.

<p>If paint stabilization above the <i>de minimis</i> amount was performed, is there documentation in the file that the paint stabilization was performed by trained or supervised workers using lead safe work practices (e.g., language in the work write-up, contract with workers, or signed certification of training)? Note: Intent to use such practices does not satisfy this requirement.</p> <p>[24 CFR 35.1330(a)]</p>	<table border="0"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><b>Yes</b></td> <td><b>No</b></td> <td><b>N/A</b></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
<b>Yes</b>	<b>No</b>	<b>N/A</b>					
<p><b>Describe Basis for Conclusion:</b></p>							

16.

If the visual assessment identified deteriorated paint above the <i>de minimis</i> amount, is there a clearance report in the file that documents that all paint was stabilized and that the work areas passed clearance before a family was allowed to occupy the unit? [24 CFR 35.1215(b)]	<table border="0"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><b>Yes</b></td> <td><b>No</b></td> <td><b>N/A</b></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
<b>Yes</b>	<b>No</b>	<b>N/A</b>					
<b>Describe Basis for Conclusion:</b>  							

17.

If paint stabilization above the <i>de minimis</i> amount was performed, is there documentation that the assisted household received a Notice of Lead Hazard Reduction within 15 days after the work? [24 CFR 35.1215(c); 24 CFR 35.1210(a)]	<table border="0"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><b>Yes</b></td> <td><b>No</b></td> <td><b>N/A</b></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
<b>Yes</b>	<b>No</b>	<b>N/A</b>					
<b>Describe Basis for Conclusion:</b>  							

18.

If a child with an environmental intervention blood lead level was living in the assisted unit, were the proper evaluation (risk assessment within 15 days of notice by health department or other medical health care provider), reduction of hazards (within 30 days of owner's receipt of risk assessment), and notification steps (evaluation and hazard reduction within 15 days of the activity) taken? [24 CFR 35.1225]	<table border="0"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><b>Yes</b></td> <td><b>No</b></td> <td><b>N/A</b></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
<b>Yes</b>	<b>No</b>	<b>N/A</b>					
<b>Describe Basis for Conclusion:</b>  							

**C. EXHIBIT SUMMARY:**

For any findings or concerns identified in this Exhibit, list the number of the question below in the appropriate column:	
<b>Finding Question #:</b>  	<b>Concern Question #:</b>  