

Lead Monthly Summary**Lead Inspection/Risk Assessment/Clearance Examination Activity**

- In accordance with paragraph (D) of rule 3701-32-15 of the Ohio Administrative Code this monthly summary form shall be completed to report each previous month's activities. This form should be submitted by the 15th of each month. If there was no activity performed that month, check the "no activity" box.
- Please complete all parts of this form. This form will be returned if any information is lacking.
- Please complete a separate line for each property address and each activity. For example, if you conducted a clearance examination at 111 Main Street and the examination initially failed, but passed upon reexamination, you should enter each examination as a separate line. One line should be completed for the failed examination and one line for the passed examination.
- You should always indicate "Yes" to the question "Was a lead hazard found" if the property failed clearance examination.
- You should always indicate "No" to the question "Was a lead hazard found" if the property passed the clearance examination.
- Monthly summary forms can be submitted by one of the following methods:
 - Sent by first class mail to: Ohio Department of Health, DOA/Lead Program, 246 North High Street, Columbus Ohio, 43215
 - Faxed to (614) 752-4157
 - E-mailed to lead@odh.ohio.gov

Name of licensed Lead Inspector/Risk Assessor/Clearance Technician		License number	
Employer		Phone number	
Employer address		Email address	
City		State	ZIP
Month and year of reportable activity (one month per form only) <input type="checkbox"/> No activity			

Summary Information

1. Property address	City	State OH	ZIP
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Was constructed before 1950? Yes NoWas a lead hazard found? Yes NoActivity performed *select only one per line*

- | | |
|--|---|
| <input type="checkbox"/> Inspection | <input type="checkbox"/> Partial Inspection |
| <input type="checkbox"/> Risk Assessment | <input type="checkbox"/> Partial Risk Assessment |
| <input type="checkbox"/> Lead Hazard Screen | <input type="checkbox"/> Inspection and Risk Assessment |
| <input type="checkbox"/> Clearance Examination | |

Reason for activity

- | | |
|---|--|
| <input type="checkbox"/> Abatement | <input type="checkbox"/> Non-Abatement |
| <input type="checkbox"/> EBL Investigation | <input type="checkbox"/> Lead Safe Renovation |
| <input type="checkbox"/> Hazard Control Order | <input type="checkbox"/> Essential Maintenance Practices |
| <input type="checkbox"/> Owner requested | |

If Clearance was performed, did clearance area pass? Yes No

2. Property address	City	State OH	ZIP
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Was constructed before 1950? Yes NoWas a lead hazard found? Yes NoActivity performed *select only one per line*

- | | |
|--|---|
| <input type="checkbox"/> Inspection | <input type="checkbox"/> Partial Inspection |
| <input type="checkbox"/> Risk Assessment | <input type="checkbox"/> Partial Risk Assessment |
| <input type="checkbox"/> Lead Hazard Screen | <input type="checkbox"/> Inspection and Risk Assessment |
| <input type="checkbox"/> Clearance Examination | |

Reason for activity

- | | |
|---|--|
| <input type="checkbox"/> Abatement | <input type="checkbox"/> Non-Abatement |
| <input type="checkbox"/> EBL Investigation | <input type="checkbox"/> Lead Safe Renovation |
| <input type="checkbox"/> Hazard Control Order | <input type="checkbox"/> Essential Maintenance Practices |
| <input type="checkbox"/> Owner requested | |

If Clearance was performed, did clearance area pass? Yes No

3. Property address	City	State OH	ZIP
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Was constructed before 1950? Yes NoWas a lead hazard found? Yes NoActivity performed *select only one per line*

- | | |
|--|---|
| <input type="checkbox"/> Inspection | <input type="checkbox"/> Partial Inspection |
| <input type="checkbox"/> Risk Assessment | <input type="checkbox"/> Partial Risk Assessment |
| <input type="checkbox"/> Lead Hazard Screen | <input type="checkbox"/> Inspection and Risk Assessment |
| <input type="checkbox"/> Clearance Examination | |

Reason for activity

- | | |
|---|--|
| <input type="checkbox"/> Abatement | <input type="checkbox"/> Non-Abatement |
| <input type="checkbox"/> EBL Investigation | <input type="checkbox"/> Lead Safe Renovation |
| <input type="checkbox"/> Hazard Control Order | <input type="checkbox"/> Essential Maintenance Practices |
| <input type="checkbox"/> Owner requested | |

If Clearance was performed, did clearance area pass? Yes No

Lead Monthly Summary

4. Property address	City	State OH	ZIP
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Was constructed before 1950? Yes No

Was a lead hazard found? Yes No

Activity performed *select only one per line*

Reason for activity

- Inspection
- Risk Assessment
- Lead Hazard Screen
- Clearance Examination
- Partial Inspection
- Partial Risk Assessment
- Inspection and Risk Assessment

- Abatement
- EBL Investigation
- Hazard Control Order
- Owner requested
- Non-Abatement
- Lead Safe Renovation
- Essential Maintenance Practices

If Clearance was performed, did clearance area pass? Yes No

5. Property address	City	State OH	ZIP
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Was constructed before 1950? Yes No

Was a lead hazard found? Yes No

Activity performed *select only one per line*

Reason for activity

- Inspection
- Risk Assessment
- Lead Hazard Screen
- Clearance Examination
- Partial Inspection
- Partial Risk Assessment
- Inspection and Risk Assessment

- Abatement
- EBL Investigation
- Hazard Control Order
- Owner requested
- Non-Abatement
- Lead Safe Renovation
- Essential Maintenance Practices

If Clearance was performed, did clearance area pass? Yes No

6. Property address	City	State OH	ZIP
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Was constructed before 1950? Yes No

Was a lead hazard found? Yes No

Activity performed *select only one per line*

Reason for activity

- Inspection
- Risk Assessment
- Lead Hazard Screen
- Clearance Examination
- Partial Inspection
- Partial Risk Assessment
- Inspection and Risk Assessment

- Abatement
- EBL Investigation
- Hazard Control Order
- Owner requested
- Non-Abatement
- Lead Safe Renovation
- Essential Maintenance Practices

If Clearance was performed, did clearance area pass? Yes No

7. Property address	City	State OH	ZIP
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Was constructed before 1950? Yes No

Was a lead hazard found? Yes No

Activity performed *select only one per line*

Reason for activity

- Inspection
- Risk Assessment
- Lead Hazard Screen
- Clearance Examination
- Partial Inspection
- Partial Risk Assessment
- Inspection and Risk Assessment

- Abatement
- EBL Investigation
- Hazard Control Order
- Owner requested
- Non-Abatement
- Lead Safe Renovation
- Essential Maintenance Practices

If Clearance was performed, did clearance area pass? Yes No

8. Property address	City	State OH	ZIP
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Was constructed before 1950? Yes No

Was a lead hazard found? Yes No

Activity performed *select only one per line*

Reason for activity

- Inspection
- Risk Assessment
- Lead Hazard Screen
- Clearance Examination
- Partial Inspection
- Partial Risk Assessment
- Inspection and Risk Assessment

- Abatement
- EBL Investigation
- Hazard Control Order
- Owner requested
- Non-Abatement
- Lead Safe Renovation
- Essential Maintenance Practices

If Clearance was performed, did clearance area pass? Yes No

9. Property address	City	State OH	ZIP
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Was constructed before 1950? Yes No

Was a lead hazard found? Yes No

Activity performed *select only one per line*

Reason for activity

- Inspection
- Risk Assessment
- Lead Hazard Screen
- Clearance Examination
- Partial Inspection
- Partial Risk Assessment
- Inspection and Risk Assessment

- Abatement
- EBL Investigation
- Hazard Control Order
- Owner requested
- Non-Abatement
- Lead Safe Renovation
- Essential Maintenance Practices

If Clearance was performed, did clearance area pass? Yes No