

Emergency Solutions Grant

Lead Screening Worksheet

Client Name: _____

Address: _____

Contact Number: _____

Determine Whether the Unit is Subject To A Visual Assessment

If the answer to one or both of the following questions is 'no', a visual assessment is Not triggered for this unit and no further action is required at this time. Place this screening worksheet and related documentation in the program participant's file.

1. Was the leased property constructed before 1978?

Yes

No

2. Will a child under the age of six be living in the unit occupied by the household receiving ESG assistance?

Yes

No

Lead-Based Paint Visual Assessment Certification

I, _____, certify the following:

I have completed HUD's online visual assessment training and am a HUD-certified visual assessor.

I conducted a visual assessment at (address) _____
on (date) _____

No problems with paint surfaces were identified in the unit or in the in the building's common areas.

(Signature)

(Date)

