

DCM Lead Paint Inspections Co
41 Alrick Rd, Unit 2
Quincy, MA 02169
Tel: 617-481-5782 * Fax: 617-481-6641

LETTER OF FULL INITIAL LEAD INSPECTION COMPLIANCE

John Menard

453 Adams St., Unit 1A

Quincy, MA 02169

Dear John Menard:

This letter is to certify that I inspected your property located at 510 Union St., Unit 1, and relevant interior and exterior common areas, in the City/Town of Weymouth for dangerous levels of lead according to 105 CMR 460.730 of the Regulations for Lead Poisoning Prevention and Control, and determined that there were no violations of the Lead Law, Massachusetts General Laws, Chapter 111, section 197. The inspection was conducted on 10/ 02 /14.

I also certify that I observed no evidence or signs that unauthorized deleading activities may have occurred in this unit or in its associated common areas.

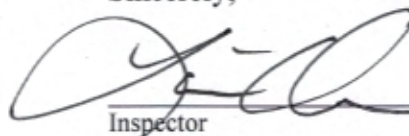
Please be advised that Massachusetts law requires that only certain residential surfaces be free of lead paint. Thus, this letter does not mean that your property contains no lead paint. The residential premises or dwelling unit and relevant common areas shall remain in compliance with the requirements of the Lead Laws referenced above only as long as there continues to be no peeling, chipping or flaking lead paint or other accessible leaded materials, as long as coverings and/or encapsulants forming an effective barrier over such paint or other leaded materials remain in place, and as long as surfaces reversed to correct lead hazards remain reversed and securely in place. The law grants you a 30-day maintenance period to repair deteriorated lead paint or detached coverings over such paint, and to clean up, during which time this Letter remains valid. The initial inspection report indicates which surfaces, if any, contain a dangerous level of lead, as well as those surfaces, if any, that were covered upon initial inspection.

The CLPPP authorized serial number for this Letter of Full Initial Lead Inspection Compliance is 60234074100214-1. This number is tracked and unique to this address and unit.

DO NOT LOSE THESE DOCUMENTS. If the documents are lost you will be required to have additional private inspector services that may cost you significant amounts of money. This Letter of Full Initial Lead Inspection Compliance is only for the address and unit number noted above. If you change the street address, unit/apartment number or any other identifying information pertaining to the residential premises referred to in this Letter of Full Initial Lead Inspection Compliance, this Compliance Letter may be considered null and void by the Department of Public Health and/or a municipal health office.

Do not alter this document in any way. Altering this document is fraudulent and may endanger the health and safety of a child which may result in significant legal consequences. In addition to any potential civil liability which may arise as the result of the alteration of this Letter of Compliance, the Massachusetts Department of Public Health's Childhood Lead Poisoning Prevention program may seek criminal prosecution of any person who alters this document after it is originally issued.

Sincerely,



Inspector

4074 10/ 02 /14
License # Date

Questions? Call the Department of Public Health at 1-800-532-9571.
DO NOT LOSE THESE DOCUMENTS

Lead Inspection / Risk Assessment Report

Laurie Durkan

DCM Lead Paint Inspections Co
 41 Alrick Rd, Unit 2
 Quincy, MA 02169
 Tel: 617-481-5782 * Fax: 617-481-6641

St.# 510	Street Name Union	Street Type St.	Unit 1
City Weymouth	Zip Code 02190		

Owners Name: John Menard
 Owner Address: 453 Adams St., Unit 1A, Quincy, MA 02169
 Contact Information: Johnmenard1@gmail.com
 Client Name (if different from owner): 617-894-2117
 Client Address: _____

Number of Rooms in Unit 6

Property Type:
 Single Family
 Multi Family # of Units 2
 Condominium # of Units _____
 Day Care Other _____

Key	Legend Column
COV	Covered
VB	Vinyl Baseboard
MET	Metal
VR	Vinyl Rep. Window
MR	Metal Rep. Window
NA	Not Accessible
NC	No Coating
Tile	Tile (testing suggested)
DC	Dropped Ceiling

Key	Treatment Method	Key	Treatment Method
CAP	Capped	SCR	Scraped
COV	Covered	DIP	Dipped
ENC	Encapsulated	REM	Removed
MI	Made Intact	REP	Replaced
PRE	Prepared for Enc.	REV	Reversed
VR/MR	Vinyl/Metal Rep Window	INT	Intact
SFR	Storm Frame Removed		
<input checked="" type="checkbox"/>	Component Does Not Exist		

Laundry in Basement? Yes No
 Finished Space in Basement Yes No

Testing Method Used

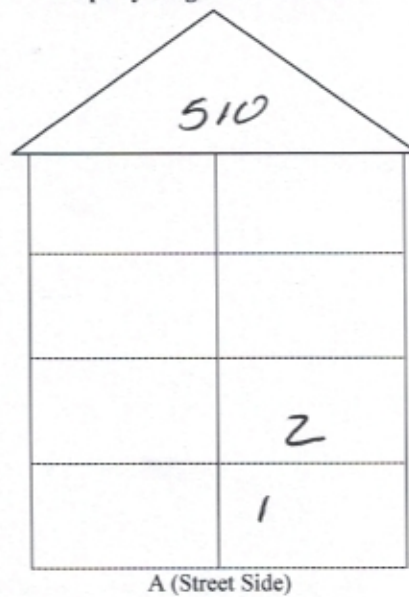
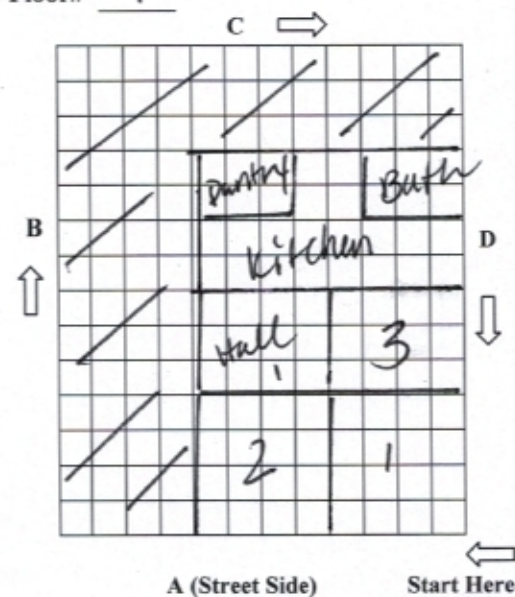
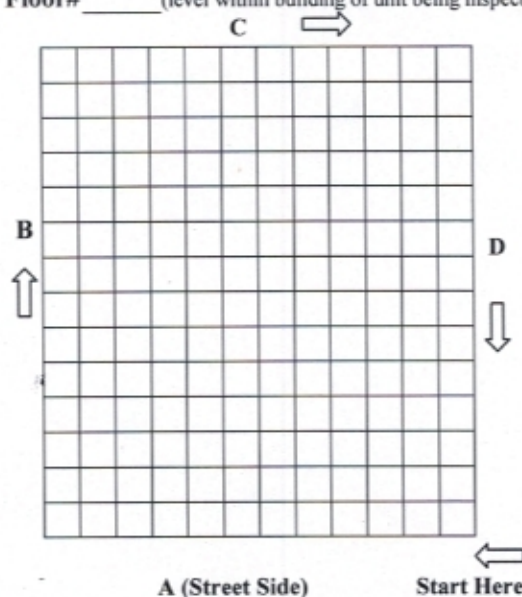
Na₂S Expiration Date: 12 /06 /14
 X-Ray Fluorescence
 Model: RMD LPA1 Serial # 3515

Comments / Notes: _____

Floor# _____ (level within building of unit being inspected)

Floor# 1

Property Diagram / Unit Labels



Pb (lead) equal to or greater than 1.0 m/cm² with x-ray fluorescence or positive with Na₂S is Dangerous.

XRF Calibration Recorded In Log Book
 Address verified through USPS
 Research on Lead Related History for Address

- ✓ - Check off when complete
- ✓ - Check off when complete
- ✓ - Check off when complete

Laurie Durkan
 Inspector's Names

4074

License #

[Handwritten Signature]

Signature

10/02/14

Date

INSPECTION HISTORY

Determination	<input type="checkbox"/> Y <input type="checkbox"/> N
Lead Hazards?	

Inspector Name: _____, Lic# _____
Signature _____

Comprehensive Initial Inspection	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Lead Hazards?	

Inspector Name: Laura DeB..., Lic# 40014
Signature _____

Comp Initial w/Partial PCAD	<input type="checkbox"/> Y <input type="checkbox"/> N
Lead Hazards?	

Inspector Name: _____, Lic# _____
Signature _____

Addendum (add-on to Initial Inspection)	<input type="checkbox"/> Y <input type="checkbox"/> N
Lead Hazards?	

Inspector Name: _____, Lic# _____
Signature _____

Addendum as Full Insp. (Lost Docs)	<input type="checkbox"/> Y <input type="checkbox"/> N
Lead Hazards?	

Inspector Name: _____, Lic# _____
Signature _____

Walk Through for Ed/Consultation	
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Inspector Name: _____, Lic# _____
Signature _____

REINSPECTION HISTORY

Visual Portion of Reocc. Reinspection	<input type="checkbox"/> P <input type="checkbox"/> F
---------------------------------------	--

Inspector Name: _____, Lic# _____
Signature _____

Visual Portion of Reocc. Reinspection	<input type="checkbox"/> P <input type="checkbox"/> F
---------------------------------------	--

Inspector Name: _____, Lic# _____
Signature _____

Dust Taken for Reocc. Reinspection	<input type="checkbox"/> P <input type="checkbox"/> F
------------------------------------	--

Inspector Name: _____, Lic# _____
Signature _____

Dust Taken for Reocc. Reinspection	<input type="checkbox"/> P <input type="checkbox"/> F
------------------------------------	--

Inspector Name: _____, Lic# _____
Signature _____

Visual Portion of Final Reinspection	<input type="checkbox"/> P <input type="checkbox"/> F
--------------------------------------	--

Inspector Name: _____, Lic# _____
Signature _____

Visual Portion of Final Reinspection	<input type="checkbox"/> P <input type="checkbox"/> F
--------------------------------------	--

Inspector Name: _____, Lic# _____
Signature _____

Dust Taken for Final Reinsp. (No Reocc)	<input type="checkbox"/> P <input type="checkbox"/> F
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Inspector Name: _____, Lic# _____
Signature _____

Dust Taken for Final Reinsp. (No Reocc)	<input type="checkbox"/> P <input type="checkbox"/> F
---	--

Inspector Name: _____, Lic# _____
Signature _____

INTERIM CONTROL

Risk Assessment	<input type="checkbox"/> Y <input type="checkbox"/> N
Urgent Pb. Hazards?	

R.A. Name: _____, Lic# _____
Signature _____

Dust Taken for Risk Assessment	<input type="checkbox"/> P <input type="checkbox"/> F
--------------------------------	--

R.A. Name: _____, Lic# _____
Signature _____

Visual Portion of Reinspection for Interim Control	<input type="checkbox"/> P <input type="checkbox"/> F
--	--

R.A. Name: _____, Lic# _____
Signature _____

Dust Taken for Risk Assessment Reinsp.	<input type="checkbox"/> P <input type="checkbox"/> F
--	--

R.A. Name: _____, Lic# _____
Signature _____

Visual Portion of Reinspection for Interim Control	<input type="checkbox"/> P <input type="checkbox"/> F
--	--

R.A. Name: _____, Lic# _____
Signature _____

Dust Taken for Risk Assessment Reinsp.	<input type="checkbox"/> P <input type="checkbox"/> F
--	--

R.A. Name: _____, Lic# _____
Signature _____

Risk Assessment Recertification	<input type="checkbox"/> Y <input type="checkbox"/> N
Urgent Pb. Hazards?	

R.A. Name: _____, Lic# _____
Signature _____

Dust Taken for RA Recertification	<input type="checkbox"/> P <input type="checkbox"/> F
-----------------------------------	--

R.A. Name: _____, Lic# _____
Signature _____

POST COMPLIANCE ASSESSMENT DETERMINATIONS

PCAD	<input type="checkbox"/> Y <input type="checkbox"/> N
Lead Hazards?	

Inspector Name: _____, Lic# _____
Signature _____

Full Inspection Acting as PCAD	<input type="checkbox"/> Y <input type="checkbox"/> N
Lead Hazards?	

Inspector Name: _____, Lic# _____
Signature _____

Visual Portion of PCAD Reinspection	<input type="checkbox"/> P <input type="checkbox"/> F
-------------------------------------	--

Inspector Name: _____, Lic# _____
Signature _____

Dust Taken for PCAD Reinspection	<input type="checkbox"/> P <input type="checkbox"/> F
----------------------------------	--

Inspector Name: _____, Lic# _____
Signature _____

Dust Taken for PCAD Reinspection	<input type="checkbox"/> P <input type="checkbox"/> F
----------------------------------	--

Inspector Name: _____, Lic# _____
Signature _____

REOCCUPANCY CERTIFICATE HISTORY

Certificate of Reoccupancy
Only after High/Mod Risk (# rooms rule)

Inspector Name: _____, Lic# _____

Signature _____

Certificate of Reoccupancy
Only after High/Mod Risk (# rooms rule)

Inspector Name: _____, Lic# _____

Signature _____

Certificate of Reoccupancy
Only after High/Mod Risk (# rooms rule)

Inspector Name: _____, Lic# _____

Signature _____

COMPLIANCE HISTORY

Letter of Full Initial Compliance
100214
No prior history/ No signs of UD

Inspector Name: Laura Dwyer, Lic# 4024

Signature _____

Letter of Interim Control
No prior Comp. Expires in 1 yr.

Inspector Name: _____, Lic# _____

Signature _____

Recertification of Interim Control
Expires 2 yrs from original Interim Control

Inspector Name: _____, Lic# _____

Signature _____

Letter of Full Deleading Compliance
Dust wipes if No Reocc.

Inspector Name: _____, Lic# _____

Signature _____

Certificate of Maintained Compliance
No Work= No Dust Work = 7 Dust

Inspector Name: _____, Lic# _____

Signature _____

Certificate of Restored Compliance
Dust wipes and auth. people

Inspector Name: _____, Lic# _____

Signature _____

COMPLIANCE HISTORY (CONT.)

Certificate of Maintained Compliance
No Work= No Dust Work = 7 Dust

Inspector Name: _____, Lic# _____

Signature _____

Certificate of Restored Compliance
Dust wipes and auth. people

Inspector Name: _____, Lic# _____

Signature _____

Certificate of Maintained Compliance
No Work= No Dust Work = 7 Dust

Inspector Name: _____, Lic# _____

Signature _____

Certificate of Restored Compliance
Dust wipes and auth. people

Inspector Name: _____, Lic# _____

Signature _____

OTHER HISTORY: WAIVERS/UD/EPA RRP

Approved CLPPP Waiver
Attach to Comp Docs

CLPPP Insp. Name: _____, Lic# _____

Signature _____

Approved CLPPP Waiver
Attach to Comp Docs

CLPPP Insp. Name: _____, Lic# _____

Signature _____

UD / DES Visual Reinspection
No LOC Issued

Inspector Name: _____, Lic# _____

P
 F
Signature _____

UD / DES Visual Reinspection
No LOC Issued

Inspector Name: _____, Lic# _____

P
 F
Signature _____

UD / DES Dust Taken
No LOC Issued

Inspector Name: _____, Lic# _____

P
 F
Signature _____

UD/DES Dust Taken
No LOC Issued

Inspector Name: _____, Lic# _____

P
 F
Signature _____

INSPECTION HISTORY

Addendum (add-on)	<input type="checkbox"/> Y <input type="checkbox"/> N
Lead Hazards?	

Inspector Name: _____, Lic# _____
Signature _____

Walk Through for Ed/Consultation	<input type="checkbox"/> Y <input type="checkbox"/> N
Completed ?	

Inspector Name: _____, Lic# _____
Signature _____

Walk Through for Ed/Consultation	<input type="checkbox"/> Y <input type="checkbox"/> N
Completed?	

Inspector Name: _____, Lic# _____
Signature _____

REINSPECTION HISTORY

Visual Portion of Reocc. Reinspection	<input type="checkbox"/> P <input type="checkbox"/> F

Inspector Name: _____, Lic# _____
Signature _____

Visual Portion of Reocc. Reinspection	<input type="checkbox"/> P <input type="checkbox"/> F

Inspector Name: _____, Lic# _____
Signature _____

Dust Taken for Reocc. Reinspection	<input type="checkbox"/> P <input type="checkbox"/> F

Inspector Name: _____, Lic# _____
Signature _____

Dust Taken for Reocc. Reinspection	<input type="checkbox"/> P <input type="checkbox"/> F

Inspector Name: _____, Lic# _____
Signature _____

Dust Taken for Reocc. Reinspection	<input type="checkbox"/> P <input type="checkbox"/> F

Inspector Name: _____, Lic# _____
Signature _____

Visual Portion of Final Reinspection	<input type="checkbox"/> P <input type="checkbox"/> F

Inspector Name: _____, Lic# _____
Signature _____

Visual Portion of Final Reinspection	<input type="checkbox"/> P <input type="checkbox"/> F

Inspector Name: _____, Lic# _____
Signature _____

Dust Taken for Final Reinsp. (No Reocc)	<input type="checkbox"/> P <input type="checkbox"/> F

Inspector Name: _____, Lic# _____
Signature _____

Dust Taken for Final Reinsp. (No Reocc)	<input type="checkbox"/> P <input type="checkbox"/> F

Inspector Name: _____, Lic# _____
Signature _____

INTERIM CONTROL

Dust Taken for Risk Assessment	<input type="checkbox"/> P <input type="checkbox"/> F

R.A. Name: _____, Lic# _____
Signature _____

Visual Reinspection for Interim Control	<input type="checkbox"/> P <input type="checkbox"/> F

R.A. Name: _____, Lic# _____
Signature _____

Dust Taken for Risk Assessment Reinsp.	<input type="checkbox"/> P <input type="checkbox"/> F

R.A. Name: _____, Lic# _____
Signature _____

Risk Assessment Recertification	<input type="checkbox"/> Y <input type="checkbox"/> N
Urgent Pb. Hazards?	

R.A. Name: _____, Lic# _____
Signature _____

Dust Taken for RA Recertification	<input type="checkbox"/> P <input type="checkbox"/> F

R.A. Name: _____, Lic# _____
Signature _____

Risk Assessment Recertification	<input type="checkbox"/> Y <input type="checkbox"/> N
Urgent Pb. Hazards?	

R.A. Name: _____, Lic# _____
Signature _____

Dust Taken for RA Recertification	<input type="checkbox"/> P <input type="checkbox"/> F

R.A. Name: _____, Lic# _____
Signature _____

POST COMPLIANCE ASSESSMENT DETERMINATIONS

PCAD	<input type="checkbox"/> Y <input type="checkbox"/> N
Lead Hazards?	

Inspector Name: _____, Lic# _____
Signature _____

Full Inspection Acting as PCAD	<input type="checkbox"/> Y <input type="checkbox"/> N
Lead Hazards?	

Inspector Name: _____, Lic# _____
Signature _____

Visual Portion of PCAD Reinspection	<input type="checkbox"/> P <input type="checkbox"/> F

Inspector Name: _____, Lic# _____
Signature _____

Dust Taken for PCAD Reinspection	<input type="checkbox"/> P <input type="checkbox"/> F

Inspector Name: _____, Lic# _____
Signature _____

Dust Taken for PCAD Reinspection	<input type="checkbox"/> P <input type="checkbox"/> F

Inspector Name: _____, Lic# _____
Signature _____

REOCCUPANCY CERTIFICATE HISTORY

Certificate of Reoccupancy
Only after High/Mod Risk (# rooms rule)

Inspector Name: _____, Lic# _____
Signature _____

Certificate of Reoccupancy
Only after High/Mod Risk (# rooms rule)

Inspector Name: _____, Lic# _____
Signature _____

Certificate of Reoccupancy
Only after High/Mod Risk (# rooms rule)

Inspector Name: _____, Lic# _____
Signature _____

COMPLIANCE HISTORY

Certificate of Maintained Compliance
No Work= No Dust Work = 7 Dust

Inspector Name: _____, Lic# _____
Signature _____

Certificate of Restored Compliance
Dust wipes and auth. people

Inspector Name: _____, Lic# _____
Signature _____

Certificate of Maintained Compliance
No Work= No Dust Work = 7 Dust

Inspector Name: _____, Lic# _____
Signature _____

Certificate of Restored Compliance
Dust wipes and auth. people

Inspector Name: _____, Lic# _____
Signature _____

Certificate of Maintained Compliance
No Work= No Dust Work = 7 Dust

Inspector Name: _____, Lic# _____
Signature _____

Certificate of Maintained Compliance
No Work= No Dust Work = 7 Dust

Inspector Name: _____, Lic# _____
Signature _____

COMPLIANCE HISTORY (continued)

Certificate of Restored Compliance
Dust wipes and auth. people

Inspector Name: _____, Lic# _____
Signature _____

Certificate of Maintained Compliance
No Work= No Dust Work = 7 Dust

Inspector Name: _____, Lic# _____
Signature _____

Certificate of Restored Compliance
Dust wipes and auth. people

Inspector Name: _____, Lic# _____
Signature _____

OTHER HISTORY: WAIVERS/UD

Approved CLPPP Waiver
Attach to Comp Docs

Inspector Name: _____, Lic# _____
Signature _____

Approved CLPPP Waiver
Attach to Comp Docs

Inspector Name: _____, Lic# _____
Signature _____

UD / DES Visual Reinspection
No LOC Issued

P
F

Inspector Name: _____, Lic# _____
Signature _____

UD / DES Dust Taken
No LOC Issued

P
F

Inspector Name: _____, Lic# _____
Signature _____

UD / DES Dust Taken
No LOC Issued

P
F

Inspector Name: _____, Lic# _____
Signature _____

UD / DES Final Reinspection
No LOC Issued

P
F

Inspector Name: _____, Lic# _____
Signature _____

EXPLANATION OF LEAD INSPECTION / RISK ASSESSMENT REPORT FORM COLUMNS

This page provides general information needed to understand the lead inspection/risk assessment report. However, you should speak with the inspector/risk assessor before you start to do any work on your home.

SIDE	Refers to A, B, C, or D side of the building or room. See the diagram on the cover sheet. The "A" side of the building or room is the side facing the street that gives the property its address (usually, it is the front of the building). Keeping your back to this street, from the "A" side move clockwise to the "B" side on your left, the "C" side opposite you, and the "D" side to the right. Numbering is from left to right.
LOCATION/ SURFACE	Refers to the building component(s) being tested. Some surfaces may be made up of more than one part. For example, "Baseboard" may refer to four separate pieces of wood (one on each wall), but is still considered one surface.
LEAD	<p>The actual lead result. Each surface tested must have a result recorded in the "Lead" column.</p> <ul style="list-style-type: none"> • A number shows that the surface was tested with an XRF analyzer. A number (or average number) equal to or greater than 1.0 mg/cm² is a dangerous level of lead. • A "pos" or "neg" shows that the surface was tested with sodium sulfide. "Pos" means that there is a dangerous level of lead. • "N/A" means that the inspector was not able to test the surface. Unless the owner can get a sample to test, the inspector must assume the surface contains lead and require it to be delead, if necessary. • "MET" or "MR" means that a metal surface was not tested and only needs to be intact, even if it is a leaded surface. However, metal handrails, metal window sills, and metal railing caps, need to be delead if they test equal to or greater than 1.0 mg/cm², or is marked "N/A." • For key to abbreviations like "COV", "VB", "VR" or "MR", "NC", "Tile", "DC", see the cover page. • When a component box is slashed and there are test results above and below the diagonal line, the result on the "bottom" represents results below 5 ft. and the "top" result indicates the test result above 5 ft.
TYPE OF HAZARD	<p>Not all lead paint must be delead. This column tells you IF and WHY a surface needs deleading. The deleading standards below may not apply for Interim Controls. Speak to your risk assessor for more information.</p> <ul style="list-style-type: none"> • "M/I" circled means that the surface is a moveable/impacted surface and must be delead in its entirety. • "SF" circled indicates that there is a storm frame present which requires the blind stop and exterior sill be delead as interior moveable / impacted surfaces. • "A/M" circled means that the surface is "accessible mouthable" and must be delead to a minimum of five feet high, four inches in from the edge or corner. • "L" circled means that the surface is loose and must, at minimum, be made intact. • If more than one choice is circled, the rules for deleading may change depending upon what method of deleading you choose. Speak to the inspector for more information. • "N/A" means the inspector was unable to determine if the surface was a lead hazard. The person doing the deleading must check this surface and follow all the rules for deleading. Speak to the inspector for more information. • If nothing is circled in the column, then it is likely the surface does not need deleading. Speak to the inspector for more information. Remember, this does not mean the entire surface is lead free, it just does not require deleading in its current condition.
URG HAZ?	This column is only completed during a risk assessment. A risk assessment is an evaluation of a home's suitability for Interim Control. Only a licensed risk assessor can do a risk assessment, not all inspectors are risk assessors. If "Y" is circled, then this surface is considered an "Urgent Lead Hazard" and some type of deleading work is required to qualify for Interim Control.
IC DATE	The date the licensed risk assessor determines the surface meets the standards for Interim Control.
IC METH	The deleading method or structural repair done to qualify the surface for Interim Control. Refer to the deleading codes key on the cover page.
DELEAD DATE	The date that the lead inspector reinspects the surface and finds that it has been successfully brought back into compliance.
DELEAD METH	The method used to bring a surface into full compliance. Refer to codes in the Key on the cover page of the PCAD
EXCLUDED SURFACES	The amount of loose paint on a surface as measured by the lead inspector. "N/A" means that the inspector was not able to measure the loose paint, but has determined it is more than the cut-off for moderate risk making intact.

Laurie Durkan

4074

10/2/2014

Page 5 of 21

Inspector (print)

Lic #

Signature

Date

Laurie Durkan

4074

10/2/2014

Risk Assessor (print)

Lic #

Signature

Date

Address of Property: 510 Union St. Apt # 1 City: Weymouth

ROOM # 1

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
A B C D	Up Walls	-03	A/M L N/A	Y				
A B C D	Low Walls	/	A/M L N/A	Y				
A B C D	Baseboards	NC	A/M L N/A	Y				
A B C D	Chair Rail	.	A/M L N/A	Y				
A B C D	Radiator	met	A/M L N/A	Y				
-	Floor	ca	A/M L N/A	Y				
-	Ceiling	-02	A/M L N/A	Y				
A B	Door	NC	A/M L N/A	Y				
C D	Door Casing	NC	A/M L N/A	Y				
1 2	Door Jamb	NC	A/M L N/A	Y				
3 4	Threshold	NC	A/M L N/A	Y				
A B	Door	NC	A/M L N/A	Y				
C D	Door Casing	NC	A/M L N/A	Y				
1 2	Door Jamb	NC	A/M L N/A	Y				
3 4	Threshold	/	A/M L N/A	Y				
A B	Door	NC	A/M L N/A	Y				
C D	Door Casing	NC	A/M L N/A	Y				
1 2	Door Jamb	NC	A/M L N/A	Y				
3 4	Threshold	/	A/M L N/A	Y				
A B	Door	.	A/M L N/A	Y				
C D	Door Casing	/	A/M L N/A	Y				
1 2	Door Jamb	.	A/M L N/A	Y				
3 4	Threshold	.	A/M L N/A	Y				
A	Closet Door	NC	A/M L N/A	Y				
B	Cl Casing	NC	A/M L N/A	Y				
C	Closet Jamb	NC	A/M L N/A	Y				
D	Closet Walls	CO	A/M L N/A	Y				
	Cl Baseboard	NC	A/M L N/A	Y				
1	Closet Pole	NC	A/M L N/A	Y				
2	Closet Shelf	NC	A/M L N/A	Y				
3	Cl Supports	NC	A/M L N/A	Y				
4	Closet Floor	ca	A/M L N/A	Y				
	Closet Ceiling	NA	A/M L N/A	Y				

COMMENTS / STRUCTURAL DEFECTS: 3 closet

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
A	Window Sill	NC	M/A L N/A	Y				
B	Win Apron	NC	A/M L N/A	Y				
C	Win Casing	NC	A/M L N/A	Y				
D	Header Stop	NC	M/A L N/A	Y				
	Int Stops	NC	M/A L N/A	Y				
1	Win Int Sash	NC	M/A L N/A	Y				
2	Exterior Sill	NC	SF L N/A	Y				
3	Part Bead	NC	L N/A	Y				
4	Blind Stop	/	M/SF L N/A	Y				
	Win Ext Sash	NC	L N/A	Y				
A	Window Sill	NC	M/A L N/A	Y				
B	Win Apron	NC	A/M L N/A	Y				
C	Win Casing	NC	A/M L N/A	Y				
D	Header Stop	NC	M/A L N/A	Y				
	Int Stops	NC	M/A L N/A	Y				
1	Win Int Sash	NC	M/A L N/A	Y				
2	Exterior Sill	NC	M/SF L N/A	Y				
3	Part Bead	NC	L N/A	Y				
4	Blind Stop	/	M/SF L N/A	Y				
	Win Ext Sash	NC	L N/A	Y				
A	Window Sill	.	M/A L N/A	Y				
B	Win Apron	.	A/M L N/A	Y				
C	Win Casing	.	A/M L N/A	Y				
D	Header Stop	.	M/A L N/A	Y				
	Int Stops	.	M/A L N/A	Y				
1	Win Int Sash	.	M/A L N/A	Y				
2	Exterior Sill	.	M/SF L N/A	Y				
3	Part Bead	.	M/L N/A	Y				
4	Blind Stop	.	M/SF L N/A	Y				
	Win Ext Sash	.	M/L N/A	Y				
A B	Fireplace	/	A/M L N/A	Y				
C D	Mantle	/	A/M L N/A	Y				
A B C D	Win Above 5'	/	A/M L N/A	Y				
	Ceiling Molding	/	A/M L N/A	Y				
	.	.	A/M L N/A	Y				
	.	.	A/M L N/A	Y				
	.	.	A/M L N/A	Y				

EXCLUDED SURFACES: Surfaces listed in these boxes can be made intact only by a licensed deleader.

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD

Laurie Durkan

4074

10/2/2014

Inspector (print)

Lic #

Signature

Date

Laurie Durkan

4074

10/2/2014

Risk Assessor (print)

Lic #

Signature

Date

Address of Property: 510 Union St.

Apt # / City: Weymouth

CONTINUATION OF ROOM ()

SIDE	LOCATION/SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
A B	Door	.	A/M L N/A	Y				
C D	Door Casing	.	A/M L N/A	Y				
#	Door Jamb	.	A/M L N/A	Y				
	Threshold	.	A/M L N/A	Y				
A B	Door	.	A/M L N/A	Y				
C D	Door Casing	.	A/M L N/A	Y				
#	Door Jamb	.	A/M L N/A	Y				
	Threshold	.	A/M L N/A	Y				
A B	Door	.	A/M L N/A	Y				
C D	Door Casing	.	A/M L N/A	Y				
#	Door Jamb	.	A/M L N/A	Y				
	Threshold	.	A/M L N/A	Y				
A	Closet Door	NC	A/M L N/A	Y				
B	Cl Casing	NC	A/M L N/A	Y				
B	Closet Jamb	NC	A/M L N/A	Y				
Ⓢ	Closet Walls	U.3	A/M L N/A	Y				
D	Cl Baseboard	NC	A/M L N/A	Y				
#	Closet Pole	NC	A/M L N/A	Y				
2	Closet Shelf	NC	A/M L N/A	Y				
	Cl Supports	NC	A/M L N/A	Y				
	Cl Drawers	/	A/M L N/A	Y				
	Cl Dr Frame	NC	A/M L N/A	Y				
	Closet Floor	CA	A/M L N/A	Y				
	Closet Ceiling	NA	A/M L N/A	Y				
A B	Shivs Above 5'	/	A/M L N/A	Y				
C D	Cab Above 5'	/	A/M L N/A	Y				
A B	Cab Above 5'	/	A/M L N/A	Y				
C D	Cab Above 5'	/	A/M L N/A	Y				
A B	Up Cab Frame	.	A/M L N/A	Y				
C D	Up Cab Door	.	A/M L N/A	Y				
#	Up Cab Walls	.	A/M L N/A	Y				
	Up Cab Shlvs	.	A/M L N/A	Y				
	Supports	.	A/M L N/A	Y				

COMMENTS / STRUCTURAL DEFECTS:

SIDE	LOCATION/SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
A B	Low Cab Fram	.	A/M L N/A	Y				
A B	Low Cab Door	.	A/M L N/A	Y				
C D	Low Cab Walls	.	A/M L N/A	Y				
#	Low Cab Shlvs	.	A/M L N/A	Y				
	Supports	.	A/M L N/A	Y				
	Drawers	.	A/M L N/A	Y				
A	Window Sill	.	M/I A/M L N/A	Y				
B	Win Apron	.	A/M L N/A	Y				
C	Win Casing	.	A/M L N/A	Y				
D	Header Stop	.	M/I A/M L N/A	Y				
#	Int Stops	.	M/I A/M L N/A	Y				
	Win Int Sash	.	M/I A/M L N/A	Y				
	Exterior Sill	.	M/I SF L N/A	Y				
	Part Bead	.	M/I L N/A	Y				
	Blind Stop	.	M/I SF L N/A	Y				
	Win Ext Sash	.	M/I L N/A	Y				
A	Window Sill	.	M/I A/M L N/A	Y				
B	Win Apron	.	A/M L N/A	Y				
C	Win Casing	.	A/M L N/A	Y				
D	Header Stop	.	M/I A/M L N/A	Y				
#	Int Stops	.	M/I A/M L N/A	Y				
	Win Int Sash	.	M/I A/M L N/A	Y				
	Exterior Sill	.	M/I SF L N/A	Y				
	Part Bead	.	M/I L N/A	Y				
	Blind Stop	.	M/I SF L N/A	Y				
	Win Ext Sash	.	M/I L N/A	Y				
A B	Fireplace	/	A/M L N/A	Y				
C D	Mantel	/	A/M L N/A	Y				
A B	Sidelight (L)	/	A/M L N/A	Y				
C D	Sidelight (R)	/	A/M L N/A	Y				
A B	Win Above 5'	/	A/M L N/A	Y				
C D	Win Above 5'	/	A/M L N/A	Y				

COMMENTS / STRUCTURAL DEFECTS:

EXCLUDED SURFACES: Surfaces listed in these boxes can be made intact only by a licensed deleader.

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD

Laurie Durkan

4074

10/2/2014

Page 7 of 21

Inspector (print)

Lic #

Signature

Date

Laurie Durkan

4074

10/2/2014

Risk Assessor (print)

Lic #

Signature

Date

Address of Property: 510 Union St.

Apt # 1 City: Weymouth

ROOM # 2

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
A B C D	Up Walls	OK	A/M L N/A	Y				
A B C D	Low Walls	/	A/M L N/A	Y				
A B C D	Baseboards	NC	A/M L N/A	Y				
A B C D	Chair Rail	/	A/M L N/A	Y				
A B C D	Radiator	not	A/M L N/A	Y				
A B C D	Floor	OK	A/M L N/A	Y				
A B C D	Ceiling	OK	A/M L N/A	Y				
A B C D	Door	not	A/M L N/A	Y				
C D	Door Casing	NC	A/M L N/A	Y				
1 2	Door Jamb	23	A/M L N/A	Y				
3 4	Threshold	not	A/M L N/A	Y				
A B	Door	/	A/M L N/A	Y				
C D	Door Casing	/	A/M L N/A	Y				
1 2	Door Jamb	/	A/M L N/A	Y				
3 4	Threshold	/	A/M L N/A	Y				
A B	Door	/	A/M L N/A	Y				
C D	Door Casing	/	A/M L N/A	Y				
1 2	Door Jamb	/	A/M L N/A	Y				
3 4	Threshold	/	A/M L N/A	Y				
A B	Door	/	A/M L N/A	Y				
C D	Door Casing	/	A/M L N/A	Y				
1 2	Door Jamb	/	A/M L N/A	Y				
3 4	Threshold	/	A/M L N/A	Y				
A	Closet Door	/	A/M L N/A	Y				
B	Cl Casing	/	A/M L N/A	Y				
C	Closet Jamb	/	A/M L N/A	Y				
D	Closet Walls	/	A/M L N/A	Y				
	Cl Baseboard	/	A/M L N/A	Y				
1	Closet Pole	/	A/M L N/A	Y				
2	Closet Shelf	/	A/M L N/A	Y				
3	Cl Supports	/	A/M L N/A	Y				
4	Closet Floor	/	A/M L N/A	Y				
	Closet Ceiling	/	A/M L N/A	Y				

COMMENTS / STRUCTURAL DEFECTS:

ST+BZ with

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
A	Window Sill	NC	M/I A/M L N/A	Y				
B	Win Apron	NC	A/M L N/A	Y				
C	Win Casing	NC	A/M L N/A	Y				
D	Header Stop	NC	M/I A/M L N/A	Y				
	Int Stops	NC	M/I A/M L N/A	Y				
1	Win Int Sash	OK	M/I A/M L N/A	Y				
2	Exterior Sill	OK	M/I SF L N/A	Y				
3	Part Bead	OK	M/I L N/A	Y				
4	Blind Stop	/	M/I SF L N/A	Y				
	Win Ext Sash	OK	M/I L N/A	Y				
A	Window Sill	NC	M/I A/M L N/A	Y				
B	Win Apron	NC	A/M L N/A	Y				
C	Win Casing	NC	A/M L N/A	Y				
D	Header Stop	NC	M/I A/M L N/A	Y				
	Int Stops	NC	M/I A/M L N/A	Y				
1	Win Int Sash	OK	M/I A/M L N/A	Y				
2	Exterior Sill	OK	M/I SF L N/A	Y				
3	Part Bead	OK	M/I L N/A	Y				
4	Blind Stop	/	M/I SF L N/A	Y				
	Win Ext Sash	OK	M/I L N/A	Y				
A	Window Sill	NC	M/I A/M L N/A	Y				
B	Win Apron	NC	A/M L N/A	Y				
C	Win Casing	NC	A/M L N/A	Y				
D	Header Stop	NC	M/I A/M L N/A	Y				
	Int Stops	NC	M/I A/M L N/A	Y				
1	Win Int Sash	OK	M/I A/M L N/A	Y				
2	Exterior Sill	OK	M/I SF L N/A	Y				
3	Part Bead	OK	M/I L N/A	Y				
4	Blind Stop	/	M/I SF L N/A	Y				
	Win Ext Sash	OK	M/I L N/A	Y				
A B	Fireplace	/	A/M L N/A	Y				
C D	Mantle	/	A/M L N/A	Y				
A B C D	Win Above 5'	/	A/M L N/A	Y				
	Ceiling Molding	/	A/M L N/A	Y				
		/	A/M L N/A	Y				
		/	A/M L N/A	Y				
		/	A/M L N/A	Y				

EXCLUDED SURFACES: Surfaces listed in these boxes can be made intact only by a licensed deleader.

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD

Laurie Durkan

4074

Signature

10/2/2014

Date

Page 8 Of 21

Inspector (print)

Lic #

Signature

10/2/2014

Date

Laurie Durkan

4074

Signature

Risk Assessor (print)

Lic #

Signature

Address of Property: 510 Union St. Apt # / City: Weymouth

CONTINUATION OF ROOM (2)

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH	SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
A	Window Sill	NC	M/I A/M L N/A	Y					A	Window Sill	.	M/I A/M L N/A	Y				
B	Win Apron	NC	A/M L N/A	Y					B	Win Apron	.	A/M L N/A	Y				
C	Win Casing	NC	A/M L N/A	Y					C	Win Casing	.	A/M L N/A	Y				
D	Header Stop	NC	M/I A/M L N/A	Y					D	Header Stop	.	M/I A/M L N/A	Y				
	Int Stops	NC	M/I A/M L N/A	Y						Int Stops	.	M/I A/M L N/A	Y				
#	Win Int Sash	NC	M/I A/M L N/A	Y					#	Win Int Sash	.	M/I A/M L N/A	Y				
	Exterior Sill	NC	M/I SF L N/A	Y						Exterior Sill	.	M/I SF L N/A	Y				
	Part Bead	NC	M/I L N/A	Y						Part Bead	.	M/I L N/A	Y				
	Blind Stop	NC	M/I SF L N/A	Y						Blind Stop	.	M/I SF L N/A	Y				
	Win Ext Sash	NC	M/I L N/A	Y						Win Ext Sash	.	M/I L N/A	Y				
A	Window Sill	NC	M/I A/M L N/A	Y					A	Window Sill	.	M/I A/M L N/A	Y				
B	Win Apron	NC	A/M L N/A	Y					B	Win Apron	.	A/M L N/A	Y				
C	Win Casing	NC	A/M L N/A	Y					C	Win Casing	.	A/M L N/A	Y				
D	Header Stop	NC	M/I A/M L N/A	Y					D	Header Stop	.	M/I A/M L N/A	Y				
	Int Stops	NC	M/I A/M L N/A	Y						Int Stops	.	M/I A/M L N/A	Y				
#	Win Int Sash	NC	M/I A/M L N/A	Y					#	Win Int Sash	.	M/I A/M L N/A	Y				
	Exterior Sill	NC	M/I SF L N/A	Y						Exterior Sill	.	M/I SF L N/A	Y				
	Part Bead	NC	M/I L N/A	Y						Part Bead	.	M/I L N/A	Y				
	Blind Stop	NC	M/I SF L N/A	Y						Blind Stop	.	M/I SF L N/A	Y				
	Win Ext Sash	NC	M/I L N/A	Y						Win Ext Sash	.	M/I L N/A	Y				
A	Window Sill	.	M/I A/M L N/A	Y					A	Window Sill	.	M/I A/M L N/A	Y				
B	Win Apron	.	A/M L N/A	Y					B	Win Apron	.	A/M L N/A	Y				
C	Win Casing	.	A/M L N/A	Y					C	Win Casing	.	A/M L N/A	Y				
D	Header Stop	.	M/I A/M L N/A	Y					D	Header Stop	.	M/I A/M L N/A	Y				
	Int Stops	.	M/I A/M L N/A	Y						Int Stops	.	M/I A/M L N/A	Y				
#	Win Int Sash	.	M/I A/M L N/A	Y					#	Win Int Sash	.	M/I A/M L N/A	Y				
	Exterior Sill	.	M/I SF L N/A	Y						Exterior Sill	.	M/I SF L N/A	Y				
	Part Bead	.	M/I L N/A	Y						Part Bead	.	M/I L N/A	Y				
	Blind Stop	.	M/I SF L N/A	Y						Blind Stop	.	M/I SF L N/A	Y				
	Win Ext Sash	.	M/I L N/A	Y						Win Ext Sash	.	M/I L N/A	Y				
		.	A/M L N/A	Y							.	A/M L N/A	Y				
		.	A/M L N/A	Y							.	A/M L N/A	Y				
		.	A/M L N/A	Y							.	A/M L N/A	Y				
		.	A/M L N/A	Y							.	A/M L N/A	Y				
		.	A/M L N/A	Y							.	A/M L N/A	Y				
COMMENTS / STRUCTURAL DEFECTS:									COMMENTS / STRUCTURAL DEFECTS:								

EXCLUDED SURFACES: Surfaces listed in these boxes can be made intact only by a licensed deleader.

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD	SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD

Laurie Durkan

4074

10/2/2014

Inspector (print)

Lic #

Signature

Date

Laurie Durkan

4074

10/2/2014

Risk Assessor (print)

Lic #

Signature

Date

Address of Property: 510 Union St.

Apt # 1 City: Weymouth

ROOM # 3

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
A B C D	Up Walls	01	A/M L N/A	Y				
A B C D	Low Walls	/	A/M L N/A	Y				
A B C D	Baseboards	NC	A/M L N/A	Y				
A B C D	Chair Rail	.	A/M L N/A	Y				
A B C D	Radiator	NC	A/M L N/A	Y				
A B C D	Floor	CA	A/M L N/A	Y				
A B C D	Ceiling	05	A/M L N/A	Y				
A B C D	Door	NC	A/M L N/A	Y				
A B C D	Door Casing	NC	A/M L N/A	Y				
A B C D	Door Jamb	NC	A/M L N/A	Y				
A B C D	Threshold	NC	A/M L N/A	Y				
A B C D	Door	NC	A/M L N/A	Y				
A B C D	Door Casing	NC	A/M L N/A	Y				
A B C D	Door Jamb	NC	A/M L N/A	Y				
A B C D	Threshold	/	A/M L N/A	Y				
A B C D	Door	.	A/M L N/A	Y				
A B C D	Door Casing	.	A/M L N/A	Y				
A B C D	Door Jamb	.	A/M L N/A	Y				
A B C D	Threshold	.	A/M L N/A	Y				
A B C D	Door	.	A/M L N/A	Y				
A B C D	Door Casing	.	A/M L N/A	Y				
A B C D	Door Jamb	.	A/M L N/A	Y				
A B C D	Threshold	.	A/M L N/A	Y				
A B C D	Closet Door	NC	A/M L N/A	Y				
A B C D	CI Casing	NC	A/M L N/A	Y				
A B C D	Closet Jamb	NC	A/M L N/A	Y				
A B C D	Closet Walls	01	A/M L N/A	Y				
A B C D	CI Baseboard	/	A/M L N/A	Y				
A B C D	Closet Pole	NC	A/M L N/A	Y				
A B C D	Closet Shelf	00	A/M L N/A	Y				
A B C D	CI Supports	01	A/M L N/A	Y				
A B C D	Closet Floor	CA	A/M L N/A	Y				
A B C D	Closet Ceiling	NA	A/M L N/A	Y				

COMMENTS / STRUCTURAL DEFECTS:

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
A	Window Sill	NC	M/I A/M L N/A	Y				
B	Win Apron	NC	A/M L N/A	Y				
C	Win Casing	NC	A/M L N/A	Y				
D	Header Stop	NC	M/I A/M L N/A	Y				
D	Int Stops	NC	M/I A/M L N/A	Y				
1	Win Int Sash	NC	M/I A/M L N/A	Y				
2	Exterior Sill	NC	M/I SF L N/A	Y				
3	Part Bead	NC	M/I L N/A	Y				
4	Blind Stop	NC	M/I SF L N/A	Y				
4	Win Ext Sash	NC	M/I L N/A	Y				
A	Window Sill	NC	M/I A/M L N/A	Y				
B	Win Apron	NC	A/M L N/A	Y				
C	Win Casing	NC	A/M L N/A	Y				
D	Header Stop	NC	M/I A/M L N/A	Y				
D	Int Stops	NC	M/I A/M L N/A	Y				
1	Win Int Sash	NC	M/I A/M L N/A	Y				
2	Exterior Sill	NC	M/I SF L N/A	Y				
3	Part Bead	NC	M/I L N/A	Y				
4	Blind Stop	NC	M/I SF L N/A	Y				
4	Win Ext Sash	NC	M/I L N/A	Y				
A	Window Sill	NC	M/I A/M L N/A	Y				
B	Win Apron	NC	A/M L N/A	Y				
C	Win Casing	NC	A/M L N/A	Y				
D	Header Stop	NC	M/I A/M L N/A	Y				
D	Int Stops	NC	M/I A/M L N/A	Y				
1	Win Int Sash	NC	M/I A/M L N/A	Y				
2	Exterior Sill	NC	M/I SF L N/A	Y				
3	Part Bead	NC	M/I L N/A	Y				
4	Blind Stop	NC	M/I SF L N/A	Y				
4	Win Ext Sash	NC	M/I L N/A	Y				
A B	Fireplace	/	A/M L N/A	Y				
C D	Mantle	/	A/M L N/A	Y				
A B C D	Win Above 5'	/	A/M L N/A	Y				
A B C D	Ceiling Molding	/	A/M L N/A	Y				
		.	A/M L N/A	Y				
		.	A/M L N/A	Y				
		.	A/M L N/A	Y				

EXCLUDED SURFACES: Surfaces listed in these boxes can be made intact only by a licensed deleader.

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD

Laurie Durkan

4074

10/2/2014

Inspector (print)

Lic #

Signature

Date

Laurie Durkan

4074

10/2/2014

Risk Assessor (print)

Lic#

Signature

Date

Address of Property: 510 Union St.

Apt # / City: Weymouth

KITCHEN

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
A B C D	Up Walls	01	A/M L N/A	Y				
A B C D	Low Walls	NK	A/M L N/A	Y				
A B C D	Baseboards	NK	A/M L N/A	Y				
A B C D	Chair Rail	NK	A/M L N/A	Y				
A B C D	Radiator	NK	A/M L N/A	Y				
	Floor	CA	A/M L N/A	Y				
	Ceiling	01	A/M L N/A	Y				
A B	Door	/	A/M L N/A	Y				
D	Door Casing	/	A/M L N/A	Y				
2	Door Jamb	05	A/M L N/A	Y				
3 4	Threshold	/	A/M L N/A	Y				
A B	Door	NK	A/M L N/A	Y				
D	Door Casing	NK	A/M L N/A	Y				
10	Door Jamb	NK	A/M L N/A	Y				
3 4	Threshold	NK	A/M L N/A	Y				
A B	Door	NK	A/M L N/A	Y				
D	Door Casing	NK	A/M L N/A	Y				
2	Door Jamb	NK	A/M L N/A	Y				
3 4	Threshold	NK	A/M L N/A	Y				
A B	Door	NK	A/M L N/A	Y				
D	Door Casing	NK	A/M L N/A	Y				
12	Door Jamb	NK	A/M L N/A	Y				
3 4	Threshold	NK	A/M L N/A	Y				
A	Closet Door	NK	A/M L N/A	Y				
B	Cl Casing	NK	A/M L N/A	Y				
C	Closet Jamb	NK	A/M L N/A	Y				
D	Closet Walls	02	A/M L N/A	Y				
	Cl Baseboard	/	A/M L N/A	Y				
1	Closet Pole	/	A/M L N/A	Y				
2	Closet Shelf	01	A/M L N/A	Y				
3	Cl Supports	00	A/M L N/A	Y				
4	Closet Floor	01	A/M L N/A	Y				
	Closet Ceiling	NK	A/M L N/A	Y				

COMMENTS / STRUCTURAL DEFECTS:

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
A	Window Sill	00	MI A/M L N/A	Y				
B	Win Apron	05	A/M L N/A	Y				
C	Win Casing	NK	A/M L N/A	Y				
D	Header Stop	NK	MI A/M L N/A	Y				
	Int Stops	NK	MI A/M L N/A	Y				
1	Win Int Sash	NK	MI A/M L N/A	Y				
2	Exterior Sill	NK	MI SF L N/A	Y				
3	Part Bead	NK	MI L N/A	Y				
4	Blind Stop	/	MI SF L N/A	Y				
	Win Ext Sash	NK	MI L N/A	Y				
A	Window Sill	NK	MI A/M L N/A	Y				
B	Win Apron	NK	A/M L N/A	Y				
C	Win Casing	NK	A/M L N/A	Y				
D	Header Stop	NK	MI A/M L N/A	Y				
	Int Stops	NK	MI A/M L N/A	Y				
1	Win Int Sash	NK	MI A/M L N/A	Y				
2	Exterior Sill	NK	MI SF L N/A	Y				
3	Part Bead	NK	MI L N/A	Y				
4	Blind Stop	/	MI SF L N/A	Y				
	Win Ext Sash	NK	MI L N/A	Y				
A B	Up Cab Frame	01	A/M L N/A	Y				
C D	Up Cab Door	03	A/M L N/A	Y				
	Up Cab Walls	02	A/M L N/A	Y				
1 2	Up Cab Shlvs	01	A/M L N/A	Y				
3 4	Supports	05	A/M L N/A	Y				
	Low Cab Fram	01	A/M L N/A	Y				
A B	Low Cab Door	04	A/M L N/A	Y				
C D	Low Cab Walls	02	A/M L N/A	Y				
	Low Cab Shlvs	01	A/M L N/A	Y				
1 2	Supports	03	A/M L N/A	Y				
3 4	Drawers	06	A/M L N/A	Y				
A B C D	Win Above 5'	/	MI A/M L N/A	Y				
			MI A/M L N/A	Y				
			MI A/M L N/A	Y				
			MI A/M L N/A	Y				
			MI A/M L N/A	Y				

EXCLUDED SURFACES: Surfaces listed in these boxes can be made intact only by a licensed deleader.

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD

Inspector (print)

Lic #

Signature

Date

Laurie Durkan

4074

10/2/2014

Risk Assessor (print)

Signature

Date

Address of Property: 510 Union St. Apt # 1 City: Weymouth

PANTRY

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH	SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
A B	Up Walls	02	A/M L N/A	Y					A B	Up Cab Frame	.	A/M L N/A	Y				
C D	Low Walls	NC	A/M L N/A	Y					C D	Up Cab Door	.	A/M L N/A	Y				
A B	Baseboards	NC	A/M L N/A	Y						Up Cab Walls	.	A/M L N/A	Y				
C D	Chair Rail	NC	A/M L N/A	Y					1 2	Up Cab Shlvs	.	A/M L N/A	Y				
A B	Radiator	/	A/M L N/A	Y					3 4	Supports	.	A/M L N/A	Y				
C D	Floor	02	A/M L N/A	Y					A B	Up Cab Frame	.	A/M L N/A	Y				
	Ceiling	01	A/M L N/A	Y					C D	Up Cab Door	.	A/M L N/A	Y				
A B	Door	met	A/M L N/A	Y						Up Cab Walls	.	A/M L N/A	Y				
C D	Door Casing	NC	A/M L N/A	Y					1 2	Up Cab Shlvs	.	A/M L N/A	Y				
1 2	Door Jamb	00	A/M L N/A	Y					3 4	Supports	.	A/M L N/A	Y				
3 4	Threshold	met	A/M L N/A	Y						Low Cab Fram	.	A/M L N/A	Y				
A B	Door	/	A/M L N/A	Y					A B	Low Cab Door	.	A/M L N/A	Y				
C D	Door Casing	/	A/M L N/A	Y					C D	Low Cab Walls	.	A/M L N/A	Y				
1 2	Door Jamb	04	A/M L N/A	Y						Low Cab Shlvs	.	A/M L N/A	Y				
3 4	Threshold	/	A/M L N/A	Y					1 2	Supports	.	A/M L N/A	Y				
A	Closet Door	.	A/M L N/A	Y					3 4	Drawers	.	A/M L N/A	Y				
B	Cl Casing	.	A/M L N/A	Y						Low Cab Fram	01	A/M L N/A	Y				
C	Closet Jamb	.	A/M L N/A	Y					A B	Low Cab Door	03	A/M L N/A	Y				
D	Closet Walls	.	A/M L N/A	Y					C D	Low Cab Walls	02	A/M L N/A	Y				
	Cl Baseboard	.	A/M L N/A	Y						Low Cab Shlvs	01	A/M L N/A	Y				
1	Closet Pole	.	A/M L N/A	Y					1 2	Supports	05	A/M L N/A	Y				
2	Closet Shelf	.	A/M L N/A	Y					3 4	Drawers	04	A/M L N/A	Y				
3	Cl Supports	.	A/M L N/A	Y						Low Cab Fram	.	A/M L N/A	Y				
4	Closet Floor	.	A/M L N/A	Y					A B	Low Cab Door	.	A/M L N/A	Y				
	Closet Ceiling	.	A/M L N/A	Y					C D	Low Cab Walls	.	A/M L N/A	Y				
A B	Up Cab Frame	01	A/M L N/A	Y						Low Cab Shlvs	.	A/M L N/A	Y				
C D	Up Cab Door	03	A/M L N/A	Y					1 2	Supports	.	A/M L N/A	Y				
	Up Cab Walls	06	A/M L N/A	Y					3 4	Drawers	.	A/M L N/A	Y				
1 2	Up Cab Shlvs	05	A/M L N/A	Y						A	Window Sill	NC	M/I A/M L N/A	Y			
3 4	Supports	02	A/M L N/A	Y					B	Win Apron	/	A/M L N/A	Y				
	.	.	M/I A/M L N/A	Y					C	Win Casing	NC	A/M L N/A	Y				
	.	.	M/I A/M L N/A	Y					D	Header Stop	NC	M/I A/M L N/A	Y				
	.	.	M/I A/M L N/A	Y						Int Stops	NC	M/I A/M L N/A	Y				
COMMENTS / STRUCTURAL DEFECTS:									1	Win Int Sash	NC	M/I A/M L N/A	Y				
									2	Exterior Sill	met	M/I SF L N/A	Y				
									3	Part Bead	/	M/I L N/A	Y				
									4	Blind Stop	met	M/I SF L N/A	Y				
										Win Ext Sash	met	M/I L N/A	Y				

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SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD	SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD

Laurie Durkan

Inspector (print)

Lic #

Signature

10/2/2014

Date

Laurie Durkan

4074

10/2/2014

Risk Assessor (print)

Lic#

Signature

Date

Address of Property: 510 Union St. Apt # 1 City: Weymouth

BATHROOM # 1

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
A B C D	Up Walls	0.3	A/M L N/A	Y				
A B C D	Low Walls	NC	A/M L N/A	Y				
A B C D	Baseboards	.	A/M L N/A	Y				
A B C D	Chair Rail	NC	A/M L N/A	Y				
A B	Radiator	NC	A/M L N/A	Y				
	Floor	NC	A/M L N/A	Y				
	Ceiling	0.1	A/M L N/A	Y				
A B	Door	NC	A/M L N/A	Y				
C D	Door Casing	NC	A/M L N/A	Y				
1 2	Door Jamb	NC	A/M L N/A	Y				
3 4	Threshold	NC	A/M L N/A	Y				
A B	Door	.	A/M L N/A	Y				
C D	Door Casing	.	A/M L N/A	Y				
1 2	Door Jamb	.	A/M L N/A	Y				
3 4	Threshold	.	A/M L N/A	Y				
A	Closet Door	.	A/M L N/A	Y				
B	Cl Casing	.	A/M L N/A	Y				
C	Closet Jamb	.	A/M L N/A	Y				
D	Closet Walls	.	A/M L N/A	Y				
	Cl Baseboard	.	A/M L N/A	Y				
1	Closet Pole	.	A/M L N/A	Y				
2	Closet Shelf	.	A/M L N/A	Y				
3	Cl Supports	.	A/M L N/A	Y				
4	Closet Floor	.	A/M L N/A	Y				
	Closet Ceiling	.	A/M L N/A	Y				
A B	Up Cab Frame	.	A/M L N/A	Y				
C D	Up Cab Door	.	A/M L N/A	Y				
	Up Cab Walls	.	A/M L N/A	Y				
1 2	Up Cab Shlvs	.	A/M L N/A	Y				
3 4	Supports	.	A/M L N/A	Y				
		.	M/I A/M L N/A	Y				
		.	M/I A/M L N/A	Y				
		.	M/I A/M L N/A	Y				

COMMENTS / STRUCTURAL DEFECTS:

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
	Low Cab Fram	NC	A/M L N/A	Y				
A B	Low Cab Door	NC	A/M L N/A	Y				
C D	Low Cab Walls	NC	A/M L N/A	Y				
	Low Cab Shlvs	NC	A/M L N/A	Y				
1 2	Supports	NC	A/M L N/A	Y				
3 4	Drawers	.	A/M L N/A	Y				
A	Window Sill	NC	M/I A/M L N/A	Y				
B	Win Apron	NC	A/M L N/A	Y				
C	Win Casing	NC	A/M L N/A	Y				
D	Header Stop	NC	M/I A/M L N/A	Y				
	Int Stops	NC	M/I A/M L N/A	Y				
1	Win Int Sash	NC	M/I A/M L N/A	Y				
2	Exterior Sill	NC	M/I SF L N/A	Y				
3	Part Bead	NC	M/I L N/A	Y				
4	Blind Stop	NC	M/I SF L N/A	Y				
	Win Ext Sash	NC	M/I L N/A	Y				
A B C D	Win Above 5'	.	M/I A/M L NA	Y				
A B C D	Ceiling Molding	.	M/I A/M L NA	Y				
A B C D	Medicine Cab	NC	M/I A/M L NA	Y				
A B C D	Wall O/C	.	M/I A/M L NA	Y				
		.	M/I A/M L NA	Y				
		.	M/I A/M L NA	Y				
		.	M/I A/M L NA	Y				
		.	M/I A/M L NA	Y				
		.	M/I A/M L NA	Y				
		.	M/I A/M L NA	Y				
		.	M/I A/M L NA	Y				
		.	M/I A/M L NA	Y				

COMMENTS / STRUCTURAL DEFECTS:

EXCLUDED SURFACES: Surfaces listed in these boxes can be made intact only by a licensed deleader.

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD

Laurie Durkan

4074

10/2/2014

Inspector (print)

Lic #

Signature

Date

Laurie Durkan

4074

10/2/2014

Risk Assessor (print)

Lic #

Signature

Date

Address of Property: 510 Union St. Apt # 1 City: Weymouth

HALLWAY: Interior # 1 or Common Hallway: Front Rear Floor #

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH	SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
A B C D	Up Walls	103	A/M L N/A	Y					A	Closet Door	.	A/M L N/A	Y				
A B C D	Low Walls	/	A/M L N/A	Y	NC				B	Cl Casing	.	A/M L N/A	Y				
A B C D	Baseboards	NC	A/M L N/A	Y					C	Closet Jamb	.	A/M L N/A	Y				
A B C D	Chair Rail	NC	A/M L N/A	Y					D	Closet Walls	.	A/M L N/A	Y				
A B C D	Radiator	/	A/M L N/A	Y						Cl Baseboard	.	A/M L N/A	Y				
-	Floor	CA	A/M L N/A	Y					1	Closet Pole	.	A/M L N/A	Y				
-	Ceiling	52	A/M L N/A	Y					2	Closet Shelf	.	A/M L N/A	Y				
A B	Door	NC	A/M L N/A	Y	down to basement				3	Cl Supports	.	A/M L N/A	Y				
CD	Door Casing	NC	A/M L N/A	Y					4	Closet Floor	.	A/M L N/A	Y				
1 2	Door Jamb	NC	A/M L N/A	Y						Closet Ceiling	.	A/M L N/A	Y				
3 4	Threshold	/	A/M L N/A	Y					A	Window Sill	.	MI A/M L N/A	Y				
A B	Door	/	A/M L N/A	Y					B	Win Apron	.	A/M L N/A	Y				
C D	Door Casing	/	A/M L N/A	Y					C	Win Casing	.	A/M L N/A	Y				
1 2	Door Jamb	/	A/M L N/A	Y					D	Header Stop	.	MI A/M L N/A	Y				
3 4	Threshold	/	A/M L N/A	Y						Int Stops	.	MI A/M L N/A	Y				
A B	Door	/	A/M L N/A	Y					1	Win Int Sash	.	MI A/M L N/A	Y				
C D	Door Casing	/	A/M L N/A	Y					2	Exterior Sill	.	MI SF L N/A	Y				
1 2	Door Jamb	/	A/M L N/A	Y					3	Part Bead	.	MI L N/A	Y				
3 4	Threshold	/	A/M L N/A	Y					4	Blind Stop	.	MI SF L N/A	Y				
A B	Door	/	A/M L N/A	Y						Win Ext Sash	.	MI L N/A	Y				
C D	Door Casing	/	A/M L N/A	Y					A	Window Sill	.	MI A/M L N/A	Y				
1 2	Door Jamb	/	A/M L N/A	Y					B	Win Apron	.	A/M L N/A	Y				
3 4	Threshold	/	A/M L N/A	Y					C	Win Casing	.	A/M L N/A	Y				
A B	Door	/	A/M L N/A	Y					D	Header Stop	.	MI A/M L N/A	Y				
C D	Door Casing	/	A/M L N/A	Y						Int Stops	.	MI A/M L N/A	Y				
#	Door Jamb	/	A/M L N/A	Y					1	Win Int Sash	.	MI A/M L N/A	Y				
	Threshold	/	A/M L N/A	Y					2	Exterior Sill	.	MI SF L N/A	Y				
A	Closet Door	/	A/M L N/A	Y					3	Part Bead	.	MI L N/A	Y				
B	Cl Casing	/	A/M L N/A	Y					4	Blind Stop	.	MI SF L N/A	Y				
C	Closet Jamb	/	A/M L N/A	Y						Win Ext Sash	.	MI L N/A	Y				
D	Closet Walls	/	A/M L N/A	Y					A B C D	Win Above 5'	.	MI A/M L N/A	Y				
	Cl Baseboard	/	A/M L N/A	Y					A B C D	Ceiling Molding	.	MI A/M L N/A	Y				
1	Closet Pole	/	A/M L N/A	Y							.	MI A/M L N/A	Y				
2	Closet Shelf	/	A/M L N/A	Y					COMMENTS / STRUCTURAL DEFECTS:								
3	Cl Supports	/	A/M L N/A	Y													
4	Closet Floor	/	A/M L N/A	Y													
	Closet Ceiling	/	A/M L N/A	Y													

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SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD

Laurie Durkan

4074

[Signature]

10/2/2014

Page 4 of 21

Inspector (print)

Lic #

Signature

Date

Laurie Durkan

4074

10/2/2014

Risk Assessor (print)

Lic #

Signature

Date

Address of Property: 510 Union St. Apt # / City: Weymouth

BASEMENT/LAUNDRY AREA

SIDE	LOCATION/SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH	SIDE	LOCATION/SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
AB CD	Walls	101	A/M L N/A	Y		black			AB CD	Pipes	00	A/M L N/A	Y				
AB CD	Walls	103	A/M L N/A	Y		black			AB CD	Sink	/	A/M L N/A	Y				
AB CD	Walls	106	A/M L N/A	Y		black			AB CD	Drainpipe	02	A/M L N/A	Y				
AB CD	Walls	02	A/M L N/A	Y		black			AB CD	Serviceboard	00	A/M L N/A	Y				
AB CD	Baseboards	/	A/M L N/A	Y					AB	Shelves	/	A/M L N/A	Y				
AB CD	Chair rails	/	A/M L N/A	Y					CD	Supports	/	A/M L N/A	Y				
-	Floor	02	A/M L N/A	Y					AB	Shelves	02	A/M L N/A	Y				
-	Ceiling	N/C	A/M L N/A	Y					CD	Supports	06	A/M L N/A	Y				
AB CD	Chimney	04	A/M L N/A	Y					AB	Shelves	/	A/M L N/A	Y				
AB CD	Support Colum	/	A/M L N/A	Y					CD	Supports	/	A/M L N/A	Y				
A B	Door	/	A/M L N/A	Y						Window frame	N/C	M/I A/M L N/A	Y				
C D	Door Casing	/	A/M L N/A	Y					AB	Window Sash	N/C	M/I A/M L N/A	Y				
1 2	Door Jamb	/	A/M L N/A	Y					CD	Exterior Sill	N/C	M/I A/M L N/A	Y				
3 4	Threshold	/	A/M L N/A	Y					02	Part Bead	/	M/I A/M L N/A	Y				
A B	Door	/	A/M L N/A	Y					3 4	Win Ext Sash	N/C	M/I A/M L N/A	Y				
C D	Door Casing	/	A/M L N/A	Y						Window frame	N/C	M/I A/M L N/A	Y				
1 2	Door Jamb	/	A/M L N/A	Y					AB	Window Sash	N/C	M/I A/M L N/A	Y				
3 4	Threshold	/	A/M L N/A	Y					CD	Exterior Sill	N/C	M/I A/M L N/A	Y				
A B	Door	/	A/M L N/A	Y					1 2	Part Bead	/	M/I A/M L N/A	Y				
C D	Door Casing	/	A/M L N/A	Y					3 4	Win Ext Sash	N/C	M/I A/M L N/A	Y				
1 2	Door Jamb	/	A/M L N/A	Y						Window frame	/	M/I A/M L N/A	Y				
3 4	Threshold	/	A/M L N/A	Y					AB	Window Sash	/	M/I A/M L N/A	Y				
AB CD	Cabinets	/	A/M L N/A	Y					CD	Exterior Sill	/	M/I A/M L N/A	Y				
A B	Benches	/	A/M L N/A	Y					1 2	Part Bead	/	M/I A/M L N/A	Y				
C D	Supports	/	A/M L N/A	Y					3 4	Win Ext Sash	/	M/I A/M L N/A	Y				
A	Closet Door	/	A/M L N/A	Y						Window frame	/	M/I A/M L N/A	Y				
B	Cl Casing	/	A/M L N/A	Y					AB	Window Sash	/	M/I A/M L N/A	Y				
C	Closet Jamb	/	A/M L N/A	Y					CD	Exterior Sill	/	M/I A/M L N/A	Y				
D	Closet Walls	/	A/M L N/A	Y					1 2	Part Bead	/	M/I A/M L N/A	Y				
	Cl Baseboard	/	A/M L N/A	Y					3 4	Win Ext Sash	/	M/I A/M L N/A	Y				
1	Closet Pole	/	A/M L N/A	Y						Newel Posts	N/C	A/M L N/A	Y				
2	Closet Shelf	/	A/M L N/A	Y					AB	Handrail	N/C	A/M L N/A	Y				
3	Cl Supports	/	A/M L N/A	Y					CD	Balusters	/	A/M L N/A	Y				
4	Closet Floor	/	A/M L N/A	Y					1 2	Lower rail	/	A/M L N/A	Y				
	Closet Ceiling	/	A/M L N/A	Y					3 4	Treads	02	A/M L N/A	Y				
Comments/Structural Defects										Risers	/	A/M L N/A	Y				
										Stringer	06	A/M L N/A	Y				
									AB CD	Oil Tank	03	L N/A	Y				

EXCLUDED SURFACES: Surfaces listed in these boxes can be made intact only by a licensed deleader.

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD	SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD

Laurie Durkan

4074

10/2/2014

Inspector (print)

Lic #

Signature

Date

Laurie Durkan

4074

10/2/2014

Risk Assessor (print)

Lic#

Signature

Date

Address of Property: 510 Union St. Apt # / City: Weymouth

EXTERIOR A Side

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
A	Siding	nk	L N/A	Y				
	Corner Boards	nk	L N/A	Y				
	Lower Trim	nk	L N/A	Y				
	Upper Trim	nk	L N/A	Y				
	Win Above 5'	nk	L N/A	Y				
	Porch Above 5'	nk	L N/A	Y				
	Storm Door	nk	A/M L N/A	Y				
Door	nk	A/M L N/A	Y					
1 2	Door Casing	nk	A/M L N/A	Y				
3 4	Door Jamb	nk	A/M L N/A	Y				
3 4	Threshold	nk	A/M L N/A	Y				
3 4	Kickplate	nk	A/M L N/A	Y				
A	Storm Door	nk	A/M L N/A	Y				
	Door	nk	A/M L N/A	Y				
	Door Casing	nk	A/M L N/A	Y				
	1 2	Door Jamb	nk	A/M L N/A	Y			
	3 4	Threshold	nk	A/M L N/A	Y			
3 4	Kickplate	nk	A/M L N/A	Y				
A	Door	nk	A/M L N/A	Y				
	Door Casing	nk	A/M L N/A	Y				
	1 2	Door Jamb	nk	A/M L N/A	Y			
3 4	Threshold	nk	A/M L N/A	Y				
3 4	Kickplate	nk	A/M L N/A	Y				
A	Window Sill	nk	A/M L N/A	Y				
	Win Casing	nk	A/M L N/A	Y				
	#5	Window Sash	nk	A/M L N/A	Y			
A	Window Sill	nk	A/M L N/A	Y				
	Win Casing	nk	A/M L N/A	Y				
	#	Window Sash	nk	A/M L N/A	Y			
A	Window Sill	nk	A/M L N/A	Y				
	Win Casing	nk	A/M L N/A	Y				
	#	Window Sash	nk	A/M L N/A	Y			
B	Lamp Post	nk	L N/A	Y				

COMMENTS / STRUCTURAL DEFECTS:

Excluded Surfaces: Surfaces listed in this box can be made intact only by a licensed deleader

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 1440 SQ. IN.)	IC DATE	IC METH
A				
A				
A				
A				

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
A	Window Sill	nk	A/M L N/A	Y				
	Win Casing	nk	A/M L N/A	Y				
	#	Window Sash	nk	A/M L N/A	Y			
A	Cellar Win Sill	nk	A/M L N/A	Y				
	Cel Win Sash	nk	A/M L N/A	Y				
	#	Cel Win Frame	nk	A/M L N/A	Y			
	Screen Frame	nk	A/M L N/A	Y				
A	Cellar Win Sill	nk	A/M L N/A	Y				
	Cel Win Sash	nk	A/M L N/A	Y				
	#	Cel Win Frame	nk	A/M L N/A	Y			
	Screen Frame	nk	A/M L N/A	Y				
A	Cellar Win Sill	nk	A/M L N/A	Y				
	Cel Win Sash	nk	A/M L N/A	Y				
	#	Cel Win Frame	nk	A/M L N/A	Y			
	Screen Frame	nk	A/M L N/A	Y				
A	Foundation	nk	L N/A	Y				
	Bulkhead	nk	A/M L N/A	Y				
	Fences	nk	A/M L N/A	Y				
	Shutters	nk	A/M L N/A	Y				
A	Newel post	nk	A/M L N/A	Y				
	Railing Cap	nk	A/M L N/A	Y				
	Handrail	nk	A/M L N/A	Y				
	Balusters	nk	A/M L N/A	Y				
	Lower Rail	nk	A/M L N/A	Y				
	Treads	01	A/M L N/A	Y				Brick
	Risers	00	A/M L N/A	Y				Brick
Stringer	-04	A/M L N/A	Y				Brick	
A	Hand box met	nk	A/M L N/A	Y				
	Drain Pipes	02	L N/A	Y				
	Elec Conduit	nk	L N/A	Y				
	Oil Fill Pipe	nk	L N/A	Y				
	Overhang Trim	nk	A/M L N/A	Y				

Soil Test Results

(Must be less than 400 ppm for play area / 1200 ppm for bare soil)

LOCATION	AREA MEASUREMENT (Square Feet)	RESULT (PPM)	REMED DATE	REMED METH
Play Area				
Bare Soil				
Comments:				

Laurie Durkan

4074

10/2/2014

Inspector (print)

Lic #

Signature

Date

Laurie Durkan

4074

10/2/2014

Risk Assessor (print)

Lic#

Signature

Date

Address of Property: 510 Union St.

Apt # 1 City: Weymouth

EXTERIOR B Side

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
B	Siding	NA	L N/A	Y				
B	Corner Boards	NA	L N/A	Y				
B	Lower Trim	NA	L N/A	Y				
B	Upper Trim	NA	L N/A	Y				
B	Win Above 5'	NA	L N/A	Y				
B	Porch Above 5'	NA	L N/A	Y				
B	Storm Door	NA	A/M L N/A	Y				
B	Door	NA	A/M L N/A	Y				
B	Door Casing	NA	A/M L N/A	Y				
1 2	Door Jamb	NA	A/M L N/A	Y				
3 4	Threshold	NA	A/M L N/A	Y				
B	Kickplate	NA	A/M L N/A	Y				
B	Storm Door	NA	A/M L N/A	Y				
B	Door	NA	A/M L N/A	Y				
1 2	Door Casing	NA	A/M L N/A	Y				
3 4	Door Jamb	NA	A/M L N/A	Y				
B	Threshold	NA	A/M L N/A	Y				
B	Kickplate	NA	A/M L N/A	Y				
B	Door	NA	A/M L N/A	Y				
B	Door Casing	NA	A/M L N/A	Y				
1 2	Door Jamb	NA	A/M L N/A	Y				
3 4	Threshold	NA	A/M L N/A	Y				
B	Window Sill	NA	A/M L N/A	Y				
B	Win Casing	NA	A/M L N/A	Y				
# 1	Window Sash	NA	A/M L N/A	Y				
B	Window Sill	NA	A/M L N/A	Y				
B	Win Casing	NA	A/M L N/A	Y				
#	Window Sash	NA	A/M L N/A	Y				
B	Window Sill	NA	A/M L N/A	Y				
B	Win Casing	NA	A/M L N/A	Y				
#	Window Sash	NA	A/M L N/A	Y				
B	Lamp Post	NA	L N/A	Y				

COMMENTS / STRUCTURAL DEFECTS:

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
B	Window Sill	NA	A/M L N/A	Y				
B	Win Casing	NA	A/M L N/A	Y				
#	Window Sash	NA	A/M L N/A	Y				
B	Cellar Win Sill	NA	A/M L N/A	Y				
B	Cel Win Sash	NA	A/M L N/A	Y				
#	Cel Win Frame	NA	A/M L N/A	Y				
B	Screen Frame	NA	A/M L N/A	Y				
B	Cellar Win Sill	NA	A/M L N/A	Y				
B	Cel Win Sash	NA	A/M L N/A	Y				
#	Cel Win Frame	NA	A/M L N/A	Y				
B	Screen Frame	NA	A/M L N/A	Y				
B	Cellar Win Sill	NA	A/M L N/A	Y				
B	Cel Win Sash	NA	A/M L N/A	Y				
#	Cel Win Frame	NA	A/M L N/A	Y				
B	Screen Frame	NA	A/M L N/A	Y				
B	Foundation	NA	L N/A	Y				
B	Bulkhead	NA	A/M L N/A	Y				
B	Fences	NA	A/M L N/A	Y				
B	Shutters	NA	A/M L N/A	Y				
B	Newel post	NA	A/M L N/A	Y				
B	Railing Cap	NA	A/M L N/A	Y				
B	Handrail	NA	A/M L N/A	Y				
B	Balusters	NA	A/M L N/A	Y				
B	Lower Rail	NA	A/M L N/A	Y				
B	Treads	NA	A/M L N/A	Y				
B	Risers	NA	A/M L N/A	Y				
B	Stringer	NA	A/M L N/A	Y				
B	Lattice	NA	A/M L N/A	Y				
B	Drain Pipes	0-2	L N/A	Y				
B	Elec Conduit	0-1	L N/A	Y				
B	Oil Fill Pipe	NA	L N/A	Y				
B	Overhang Trim	NA	A/M L N/A	Y				

Excluded Surfaces: Surfaces listed in this box can be made intact only by a licensed deleader

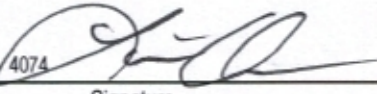
Soil Test Results

(Must be less than 400 ppm for play area / 1200 ppm for bare soil)

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 1440 SQ. IN.)	IC DATE	IC METH
B				
B				
B				
B				

LOCATION	AREA MEASUREMENT (Square Feet)	RESULT (PPM)	REMED DATE	REMED METH
Play Area				
Bare Soil				
Comments:				

Laurie Durkan

4074 

10/2/2014

Page 17 of 21

Inspector (print)

Lic #

Signature

Date

Laurie Durkan

4074

10/2/2014

Risk Assessor (print)

Lic#

Signature

Date

Address of Property: 510 Union St.

Apt # / City: Weymouth

EXTERIOR C Side

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
C	Siding	NA	L N/A	Y				
	Corner Boards	NA	L N/A	Y				
	Lower Trim	NA	L N/A	Y				
	Upper Trim	NA	L N/A	Y				
	Win Above 5'	NA	L N/A	Y				
	Porch Above 5'	NA	L N/A	Y				
C	Storm Door	NA	A/M L N/A	Y				
	Door	NA	A/M L N/A	Y				
	Door Casing	NA	A/M L N/A	Y				
	Door Jamb	NA	A/M L N/A	Y				
	Threshold	NA	A/M L N/A	Y				
	Kickplate	NA	A/M L N/A	Y				
C	Storm Door	NA	A/M L N/A	Y				
	Door	NA	A/M L N/A	Y				
	Door Casing	NA	A/M L N/A	Y				
	Door Jamb	NA	A/M L N/A	Y				
	Threshold	NA	A/M L N/A	Y				
	Kickplate	NA	A/M L N/A	Y				
C	Door	NA	A/M L N/A	Y				
	Door Casing	NA	A/M L N/A	Y				
	Door Jamb	NA	A/M L N/A	Y				
	Threshold	NA	A/M L N/A	Y				
	Kickplate	NA	A/M L N/A	Y				
	Window Sill	NA	A/M L N/A	Y				
C	Window Sill	NA	A/M L N/A	Y				
	Win Casing	NA	A/M L N/A	Y				
	Window Sash	NA	A/M L N/A	Y				
	Window Sill	NA	A/M L N/A	Y				
	Win Casing	NA	A/M L N/A	Y				
	Window Sash	NA	A/M L N/A	Y				
C	Window Sill	NA	A/M L N/A	Y				
	Win Casing	NA	A/M L N/A	Y				
	Window Sash	NA	A/M L N/A	Y				
	Window Sill	NA	A/M L N/A	Y				
	Win Casing	NA	A/M L N/A	Y				
	Window Sash	NA	A/M L N/A	Y				
C	Lamp Post	NA	L N/A	Y				

COMMENTS / STRUCTURAL DEFECTS:

Excluded Surfaces: Surfaces listed in this box can be made intact only by a licensed deleader

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 1440 SQ. IN.)	IC DATE	IC METH
C				
C				
C				
C				

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
C	Window Sill	NA	A/M L N/A	Y				
	Win Casing	NA	A/M L N/A	Y				
	Window Sash	NA	A/M L N/A	Y				
C	Cellar Win Sill	NA	A/M L N/A	Y				
	Cel Win Sash	NA	A/M L N/A	Y				
	Cel Win Frame	NA	A/M L N/A	Y				
C	Screen Frame	NA	A/M L N/A	Y				
	Cellar Win Sill	NA	A/M L N/A	Y				
	Cel Win Sash	NA	A/M L N/A	Y				
C	Cel Win Frame	NA	A/M L N/A	Y				
	Screen Frame	NA	A/M L N/A	Y				
	Cellar Win Sill	NA	A/M L N/A	Y				
C	Cel Win Sash	NA	A/M L N/A	Y				
	Cel Win Frame	NA	A/M L N/A	Y				
	Screen Frame	NA	A/M L N/A	Y				
C	Cellar Win Sill	NA	A/M L N/A	Y				
	Cel Win Sash	NA	A/M L N/A	Y				
	Cel Win Frame	NA	A/M L N/A	Y				
C	Screen Frame	NA	A/M L N/A	Y				
	Foundation	NA	L N/A	Y				
	Bulkhead	NA	A/M L N/A	Y				
C	Fences	NA	A/M L N/A	Y				
	Shutters	NA	A/M L N/A	Y				
	Newel post	NA	A/M L N/A	Y				
C	Railing Cap	NA	A/M L N/A	Y				
	Handrail	NA	A/M L N/A	Y				
	Balusters	NA	A/M L N/A	Y				
C	Lower Rail	NA	A/M L N/A	Y				
	Treads	NA	A/M L N/A	Y				
	Risers	NA	A/M L N/A	Y				
C	Stringer	NA	A/M L N/A	Y				
	Lattice	NA	A/M L N/A	Y				
	Drain Pipes	103	L N/A	Y				
C	Elec Conduit	NA	L N/A	Y				
	Oil Fill Pipe	NA	L N/A	Y				
	Overhang Trim	NA	A/M L N/A	Y				

Soil Test Results

(Must be less than 400 ppm for play area / 1200 ppm for bare soil)

LOCATION	AREA MEASUREMENT (Square Feet)	RESULT (PPM)	REMED DATE	REMED METH
Play Area				
Bare Soil				
Comments:				

Laurie Durkan

4074

10/2/2014

Inspector (print)

Lic #

Signature

Date

Laurie Durkan

4074

10/2/2014

Risk Assessor (print)

Lic#

Signature

Date

Address of Property: 510 Union St. Apt # / City: Weymouth

EXTERIOR D Side

SIDE	LOCATION/SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH	SIDE	LOCATION/SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
D	Siding	NA	L N/A	Y					D	Window Sill	.	A/M L N/A	Y				
D	Corner Boards	NA	L N/A	Y					D	Win Casing	.	A/M L N/A	Y				
D	Lower Trim	NA	L N/A	Y					#	Window Sash	.	A/M L N/A	Y				
D	Upper Trim	NA	L N/A	Y					D	Cellar Win Sill	NA	A/M L N/A	Y				
D	Win Above 5'	NA	L N/A	Y					D	Cel Win Sash	COV	A/M L N/A	Y				
D	Porch Above 5'	.	L N/A	Y					42	Cel Win Frame	NA	A/M L N/A	Y				
D	Storm Door	.	A/M L N/A	Y						Screen Frame	.	A/M L N/A	Y				
D	Door	.	A/M L N/A	Y					D	Cellar Win Sill	.	A/M L N/A	Y				
D	Door Casing	.	A/M L N/A	Y					D	Cel Win Sash	.	A/M L N/A	Y				
1 2	Door Jamb	.	A/M L N/A	Y					#	Cel Win Frame	.	A/M L N/A	Y				
3 4	Threshold	.	A/M L N/A	Y						Screen Frame	.	A/M L N/A	Y				
	Kickplate	.	A/M L N/A	Y					D	Cellar Win Sill	.	A/M L N/A	Y				
D	Storm Door	.	A/M L N/A	Y					#	Cel Win Sash	.	A/M L N/A	Y				
D	Door	.	A/M L N/A	Y						Cel Win Frame	.	A/M L N/A	Y				
D	Door Casing	.	A/M L N/A	Y						Screen Frame	.	A/M L N/A	Y				
1 2	Door Jamb	.	A/M L N/A	Y					D	Cellar Win Sill	.	A/M L N/A	Y				
3 4	Threshold	.	A/M L N/A	Y					#	Cel Win Sash	.	A/M L N/A	Y				
	Kickplate	.	A/M L N/A	Y						Cel Win Frame	.	A/M L N/A	Y				
D	Door	.	A/M L N/A	Y						Screen Frame	.	A/M L N/A	Y				
D	Door Casing	.	A/M L N/A	Y					D	Foundation	OK	L N/A	Y				BLACK
1 2	Door Jamb	.	A/M L N/A	Y					#	Bulkhead	.	A/M L N/A	Y				
3 4	Threshold	.	A/M L N/A	Y						Fences	NA	A/M L N/A	Y				
D	Window Sill	.	A/M L N/A	Y						Shutters	.	A/M L N/A	Y				
D	Win Casing	.	A/M L N/A	Y					D	Newel post	.	A/M L N/A	Y				
#	Window Sash	.	A/M L N/A	Y						Railing Cap	.	A/M L N/A	Y				
D	Window Sill	.	A/M L N/A	Y					D	Handrail	.	A/M L N/A	Y				
D	Win Casing	.	A/M L N/A	Y						Balusters	.	A/M L N/A	Y				
#	Window Sash	.	A/M L N/A	Y						Lower Rail	.	A/M L N/A	Y				
D	Window Sill	.	A/M L N/A	Y						Treads	.	A/M L N/A	Y				
D	Win Casing	.	A/M L N/A	Y						Risers	.	A/M L N/A	Y				
#	Window Sash	.	A/M L N/A	Y						Stringer	.	A/M L N/A	Y				
D	Lamp Post	.	L N/A	Y						Lattice	.	A/M L N/A	Y				
COMMENTS / STRUCTURAL DEFECTS:									D	Drain Pipes	OK	L N/A	Y				
										Elec Conduit	NA	L N/A	Y				
										Oil Fill Pipe	OK	L N/A	Y				
										Overhang Trim	.	A/M L N/A	Y				

Excluded Surfaces: Surfaces listed in this box can be made intact only by a licensed deleader

Soil Test Results

(Must be less than 400 ppm for play area / 1200 ppm for bare soil)

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 1440 SQ. IN.)	IC DATE	IC METH
D				
D				
D				
D				

LOCATION	AREA MEASUREMENT (Square Feet)	RESULT (PPM)	REMED DATE	REMED METH
Play Area				
Bare Soil				
Comments:				

Laurie Durkan

Inspector (print)

Lic #

Signature

10/2/2014

Date

Laurie Durkan

4074

10/2/2014

Risk Assessor (print)

Lic #

Signature

Date

Address of Property: 510 Union St. Apt # i City: Weymouth

PORCH A B C D (circle one) 1st fl 2nd fl 3rd fl 4th fl (circle one)

Enclosed Front

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH	SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
A B	Siding	00	L N/A	Y						Support Clmns	.	A/M L N/A	Y				
C D	Corner Boards	/	L N/A	Y						Newel post	.	A/M L N/A	Y				
	Upper Trim	/	L N/A	Y						Railing Cap	.	A/M L N/A	Y				
	Ceiling	102	L N/A	Y						Handrail	.	A/M L N/A	Y				
	Joints	/	L N/A	Y						Balusters	.	A/M L N/A	Y				
A	Door	/	A/M L N/A	Y						Lower Rail	.	A/M L N/A	Y				
B	Storm Door	102	A/M L N/A	Y						Treads	.	A/M L N/A	Y				
C	Door Casing	NC	A/M L N/A	Y						Risers	.	A/M L N/A	Y				
D	Door Jamb	102	A/M L N/A	Y						Stringer	.	A/M L N/A	Y				
102	Threshold	NC	A/M L N/A	Y						Lower Walls	.	A/M L N/A	Y				
3 4	Kickplate	/	A/M L N/A	Y						Lattice	.	A/M L N/A	Y				
A	Door	not	A/M L N/A	Y						Lower Trim	.	A/M L N/A	Y				
B	Storm Door	/	A/M L N/A	Y						Floor	.	A/M L N/A	Y				
C	Door Casing	04	A/M L N/A	Y							.	A/M L N/A	Y				
D	Door Jamb	102	A/M L N/A	Y							.	A/M L N/A	Y				
102	Threshold	not	A/M L N/A	Y							.	A/M L N/A	Y				
3 4	Kickplate	102	A/M L N/A	Y							.	A/M L N/A	Y				
A B	Window Sill	NC	A/M L N/A	Y							.	A/M L N/A	Y				
C D	Win Casing	NC	A/M L N/A	Y							.	A/M L N/A	Y				
102	Window Sash	NC	A/M L N/A	Y							.	A/M L N/A	Y				
3 4	Mullions	/	A/M L N/A	Y							.	A/M L N/A	Y				
A B	Window Sill	NC	A/M L N/A	Y							.	A/M L N/A	Y				
C D	Win Casing	NC	A/M L N/A	Y							.	A/M L N/A	Y				
102	Window Sash	NC	A/M L N/A	Y							.	A/M L N/A	Y				
3 4	Mullions	/	A/M L N/A	Y							.	A/M L N/A	Y				
A B	Window Sill	.	A/M L N/A	Y							.	A/M L N/A	Y				
C D	Win Casing	.	A/M L N/A	Y							.	A/M L N/A	Y				
1 2	Window Sash	.	A/M L N/A	Y							.	A/M L N/A	Y				
3 4	Mullions	.	A/M L N/A	Y							.	A/M L N/A	Y				
A B	Window Sill	.	A/M L N/A	Y							.	A/M L N/A	Y				
C D	Win Casing	.	A/M L N/A	Y							.	A/M L N/A	Y				
1 2	Window Sash	.	A/M L N/A	Y							.	A/M L N/A	Y				
3 4	Mullions	.	A/M L N/A	Y							.	A/M L N/A	Y				

COMMENTS / STRUCTURAL DEFECTS:

not heated

COMMENTS / STRUCTURAL DEFECTS:

EXCLUDED SURFACES: Surfaces listed in these boxes can be made intact only by a licensed deleader.

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 1440 SQ. IN.)	IC DATE	IC METHOD	SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD

Inspector (print)

Lic #

Date

Laurie Durkan

4074

10/2/2014

Risk Assessor (print)

Lic #

Signature

Date

Address of Property: 510 Union St. Apt # 7 City: Weymouth

PORCH A B C D (circle one) 1st fl 2nd fl 3rd fl 4th fl (circle one)

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
A B	Siding	.	L N/A	Y				
C D	Corner Boards	.	L N/A	Y				
	Upper Trim	.	L N/A	Y				
	Ceiling	.	L N/A	Y				
	Joists	.	L N/A	Y				
A	Door	.	A/M L N/A	Y				
B	Storm Door	.	A/M L N/A	Y				
C	Door Casing	.	A/M L N/A	Y				
D	Door Jamb	.	A/M L N/A	Y				
1 2	Threshold	.	A/M L N/A	Y				
3 4	Kickplate	.	A/M L N/A	Y				
A	Door	.	A/M L N/A	Y				
B	Storm Door	.	A/M L N/A	Y				
C	Door Casing	.	A/M L N/A	Y				
D	Door Jamb	.	A/M L N/A	Y				
1 2	Threshold	.	A/M L N/A	Y				
3 4	Kickplate	.	A/M L N/A	Y				
A B	Window Sill	.	A/M L N/A	Y				
C D	Win Casing	.	A/M L N/A	Y				
1 2	Window Sash	.	A/M L N/A	Y				
3 4	Mullions	.	A/M L N/A	Y				
A B	Window Sill	.	A/M L N/A	Y				
C D	Win Casing	.	A/M L N/A	Y				
1 2	Window Sash	.	A/M L N/A	Y				
3 4	Mullions	.	A/M L N/A	Y				
A B	Window Sill	.	A/M L N/A	Y				
C D	Win Casing	.	A/M L N/A	Y				
1 2	Window Sash	.	A/M L N/A	Y				
3 4	Mullions	.	A/M L N/A	Y				
A B	Window Sill	.	A/M L N/A	Y				
C D	Win Casing	.	A/M L N/A	Y				
1 2	Window Sash	.	A/M L N/A	Y				
3 4	Mullions	.	A/M L N/A	Y				

COMMENTS / STRUCTURAL DEFECTS:

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
	Support Cimms	NC	A/M L N/A	Y				
	Newel post	NC	A/M L N/A	Y				
	Railing Cap	NC	A/M L N/A	Y				
	Handrail	.	A/M L N/A	Y				
	Balusters	NC	A/M L N/A	Y				
	Lower Rail	NC	A/M L N/A	Y				
	Treads	NC	A/M L N/A	Y				
	Risers	NC	A/M L N/A	Y				
	Stringer	NC	A/M L N/A	Y				
	Lower Walls	NC	A/M L N/A	Y				
	Lattice	NC	A/M L N/A	Y				
	Lower Trim	NC	A/M L N/A	Y				
	Floor	NC	A/M L N/A	Y				
	.	.	A/M L N/A	Y				
	.	.	A/M L N/A	Y				
	.	.	A/M L N/A	Y				
	.	.	A/M L N/A	Y				
	.	.	A/M L N/A	Y				
	.	.	A/M L N/A	Y				
	.	.	A/M L N/A	Y				
	.	.	A/M L N/A	Y				
	.	.	A/M L N/A	Y				
	.	.	A/M L N/A	Y				
	.	.	A/M L N/A	Y				
	.	.	A/M L N/A	Y				
	.	.	A/M L N/A	Y				

COMMENTS / STRUCTURAL DEFECTS:

EXCLUDED SURFACES: Surfaces listed in these boxes can be made intact only by a licensed deleader.

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 1440 SQ. IN.)	IC DATE	IC METHOD

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 288 SQ. IN.)	IC DATE	IC METHOD

Laurie Durkan

4074

10/2/2014

Inspector (print)

Lic #

Signature

Date

Laurie Durkan

4074

10/2/2014

Risk Assessor (print)

Lic#

Signature

Date

Address of Property: 510 Union St.

Apt # / City: Weymouth

GARAGE

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
A	Siding	neg	L N/A	Y				
	Corner Boards	neg	L N/A	Y				
	Lower Trim	neg	L N/A	Y				
	Upper Trim	neg	L N/A	Y				
A	Door	.	A/M L N/A	Y				
	Door Casing	.	A/M L N/A	Y				
	Door Jamb	.	A/M L N/A	Y				
	Threshold	.	A/M L N/A	Y				
A	Window Sill	.	A/M L N/A	Y				
	Win Casing	.	A/M L N/A	Y				
	Win Sash	.	A/M L N/A	Y				
A	Foundation	.	L N/A	Y				

COMMENTS / STRUCTURAL DEFECTS:

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
C	Siding	neg	L N/A	Y				
	Corner Boards	neg	L N/A	Y				
	Lower Trim	neg	L N/A	Y				
	Upper Trim	neg	L N/A	Y				
C	Door	.	A/M L N/A	Y				
	Door Casing	.	A/M L N/A	Y				
	Door Jamb	.	A/M L N/A	Y				
	Threshold	.	A/M L N/A	Y				
C	Window Sill	.	A/M L N/A	Y				
	Win Casing	.	A/M L N/A	Y				
	Win Sash	.	A/M L N/A	Y				
C	Foundation	.	L N/A	Y				

COMMENTS / STRUCTURAL DEFECTS:

EXCLUDED SURFACES: Surfaces listed in these boxes can be made intact only by a licensed deleader.

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 1440 SQ. IN.)	IC DATE	IC METHOD
A				
A				
A				

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 1440 SQ. IN.)	IC DATE	IC METHOD
C				
C				
C				

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
B	Siding	neg	L N/A	Y				
	Corner Boards	neg	L N/A	Y				
	Lower Trim	neg	L N/A	Y				
	Upper Trim	neg	L N/A	Y				
B	Door	.	A/M L N/A	Y				
	Door Casing	.	A/M L N/A	Y				
	Door Jamb	.	A/M L N/A	Y				
	Threshold	.	A/M L N/A	Y				
B	Window Sill	.	A/M L N/A	Y				
	Win Casing	.	A/M L N/A	Y				
	Win Sash	.	A/M L N/A	Y				
B	Foundation	.	L N/A	Y				

COMMENTS / STRUCTURAL DEFECTS:
1 Box - Neg

SIDE	LOCATION/ SURFACE	LEAD	TYPE OF HAZARD	URG HAZ?	IC DATE	IC METH	DELEAD DATE	DELEAD METH
D	Siding	neg	L N/A	Y				
	Corner Boards	neg	L N/A	Y				
	Lower Trim	neg	L N/A	Y				
	Upper Trim	neg	L N/A	Y				
D	Door	.	A/M L N/A	Y				
	Door Casing	.	A/M L N/A	Y				
	Door Jamb	.	A/M L N/A	Y				
	Threshold	.	A/M L N/A	Y				
D	Window Sill	.	A/M L N/A	Y				
	Win Casing	.	A/M L N/A	Y				
	Win Sash	.	A/M L N/A	Y				
D	Foundation	.	L N/A	Y				

COMMENTS / STRUCTURAL DEFECTS:

EXCLUDED SURFACES: Surfaces listed in these boxes can be made intact only by a licensed deleader.

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 1440 SQ. IN.)	IC DATE	IC METHOD
B				
B				
B				

SIDE	LOCATION	MEASURE: LOOSE PAINT (MORE THAN 1440 SQ. IN.)	IC DATE	IC METHOD
D				
D				
D				