

Main Office: 1 Arcadia Street Dorchester, MA 02122
Toll Free: 800-349-7779
www.asapenvironmental.com

LETTER OF FULL DELEADING COMPLIANCE

Jennifer & Dannielle Lavisi
4297 Washington St
Roslindale, MA 02131

Dear Jennifer & Dannielle Lavisi

This letter is to certify that on 07 / 30 / 22 I re-inspected your property located at 4297 Washington St
Unit 4, and relevant interior and exterior common areas, in the City/Town of Roslindale, MA 02131.
On that date, those surfaces cited in the initial inspection report by Michael Sullivan, License # 4220
conducted on 05 / 18 / 22 as being in violation of Massachusetts General Laws, Chapter 111, Section 197, and 105 CMR 460.000:
Regulations for Lead Poisoning Prevention and Control, were determined to be in current compliance with those same laws. Dust samples
were taken and found to be within acceptable limits.

Massachusetts law does not require the abatement or containment of all residential 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 second page or reverse side of this letter identifies the authorized person(s) who performed deleading on the property and a general summary of the methods used to achieve compliance with the Lead Laws. A complete Reinspection Report is attached to this letter, which specifies how and on what date each surface was brought into compliance.

To the best of my knowledge, the cost of the legally required deleading is \$ 5,075.00.

The CLPPP authorized serial number for this Letter of Full Deleading Compliance is 94373984080222-4.

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 Deleading Compliance is only for the address and unit noted above. If you change the street address, unit number or any other identifying information pertaining to the residential premises referred to in this Letter of Full Deleading 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.

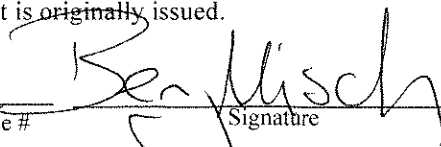
Sincerely,

Benjamin Misch

Inspector (print name)

3984

License #


Signature

08 / 02 / 22

Date

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

Serial Number: **94373984080222-4**

Address: **4297 Washington St**

Unit#: **4**

City/Town: **Roslindale, MA 02131**

Deleading History

Deleading Contractor **Bay State Environmental Svcs Corp** License#: ☒ DC **500046** Exp. Date **10 / 19 / 22**

☐ DS _____

Deleading Methods: ☒ Scraping ☒ Making Intact (Exterior) ☐ Power Sanding ☐ Caustics
☐ Heat Gun ☒ Making Intact (interior) ☐ Removal ☐ Liquid Encapsulation
☐ Demolition ☐ Replacement ☐ Covering
☐ Other _____

Work was done in the following rooms: **Room # 1, 2, 3, 5, Hall # 1, 2, 3, Bathroom, Kitchen, Common Staircase and Porch.**

Work was done on the following types of components: **Door edge/jamb, cl door edge/bsbd/ceiling, up/low walls, up trim, ceiling and joists.**

Start Date: **07 / 24 / 22**

Finish Date: **07 / 30 / 22**

Cost: \$ **5,075.00**

RRP w/additional Moderate Risk Training _____

Authorization # MR-

Expiration Date: ____ / ____ / ____

Moderate Risk Deleader (owner/agent) _____

Authorization # ☐ OM ☐ AM

Issuance Date: ____ / ____ / ____

Deleading Methods: ☐ Replacement ☐ Making Intact (Interior) ☐ Liquid Encapsulation
☐ Covering ☐ Making Intact (Exterior)
☐ Removal ☐ Other _____

Work was done in the following rooms: _____

Work was done on the following types of components: _____

Start Date: ____ / ____ / ____

Finish Date: ____ / ____ / ____

Cost: \$ _____

Low Risk Deleader (owner/agent) _____

Authorization # ☐ OL ☐ AL

Issuance Date: ____ / ____ / ____ ☐ OE ☐ AE
☐ OB ☐ AB

Deleading Methods: ☐ Covering ☐ Liquid Encapsulation
☐ Replacement (ONLY doors, cabinet doors, shutters, shelves not affixed, drawers, windows on hinges)

Work was done in the following rooms: _____

Work was done on the following types of components: _____

Start Date: ____ / ____ / ____

Finish Date: ____ / ____ / ____

Cost: \$ _____

Fact Sheet for Maintaining Compliance

Your Unit is Not Lead Free

To keep children and occupants safe you must maintain your property in the same condition as the day the inspector issued your compliance letter.

Your lead inspector indicates that the unit has:

A lot of lead left behind ☒

Some lead left behind ☐

A little lead left behind ☐

It only takes **one** lead hazard to poison a child. Check your property at least once a year or anytime you find out about a possible lead hazard. You can also hire a lead inspector to do a Post Compliance Assessment Determination (PCAD) and update your compliance letter.

How to check your property for lead hazards:

1. Make a photocopy of your report.
2. On the copy, either circle or use a highlighter to find the surfaces you need to check. Look in the Lead Column and highlight any surfaces with numbers 1.0 mg/ or higher and any surfaces that say **N/A, MET, COV, Tile, or MR**. These are the surfaces that have, or could have, a dangerous level of lead.
3. Walk the property checking to make sure that these surfaces are still in good condition. Paint must be intact. Coverings and Tile must be in good condition and secure. Write up a list of surfaces that need to be fixed.
4. Fix the lead hazards using lead safe work practices.
 - a. For a rental property, certified lead-safe renovators usually must do the work.
 - b. Contractors hired to do most repair work must be certified lead-safe renovators.
 - c. Contact DLS to find out about certified lead-safe renovators [.mass.gov/lwd/labor-standards/deleading-and-lead-](http://mass.gov/lwd/labor-standards/deleading-and-lead-)
 - d. If you are working in the home you live in, you still need to work safely. Go to epa.gov/lead/renovation-repair-and-painting-program-do-it- to learn more.

ENVIRONMENTAL HAZARDS SERVICES, INC.

7469 WHITE PINE ROAD

RICHMOND, VA 23237

Phone: 804-275-4788

Fax: 804-275-4907

ASAP Environmental, Inc.

1 Arcadia Street

Dorchester, MA 02122

Phone: 800-349-7779 Fax: 617-282-7783

Inspections @asapenvironmental.com

Benjamin Mison License # I/R-3984

Date:

7.30.22

Agency:

Owner:

Address:

Unit:

City/State/Zip:

4297 Washington St

#14

Roslindale

02131

DO WIPE SAMPLES SUBMITTED MEET ASTM E1792 REQUIREMENTS:

YES

NO

LEAD IN DUST CHAIN OF CUSTODY FORM

Sample#	Sample Type	Room	Location	Surface Sampled	Dimensions Length / Width	
1	Dust Wipe	#1	D1	Floor	12	12
2	Dust Wipe	#1	D1	Interior Window Sill	25.0	4.5
3	Dust Wipe	#1	D1	Exterior Window Well	23.0	3.0
4	Dust Wipe	#5	A1	Floor	12	12
5	Dust Wipe	#5	A1	Interior Window Sill	25.0	4.5
6	Dust Wipe	#5	A1	Exterior Window Well	23.0	3.0
7	Dust Wipe			Control Blank	12	12
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						

22-08-00025



Due Date:

08/01/2022

(Monday)

AEV

Rec'd By A. Walker A. Walker

CHAIN OF CUSTODY 08/01/22 9:36am

Date/Time	Released By:	Date/Time	Released By:
7/30/22 1pm	[Signature]		



Environmental Hazards Services, L.L.C.
7469 Whitepine Rd
Richmond, VA 23237
Telephone: 800.347.4010

Lead Dust Wipe Analysis Report

Report Number: 22-08-00025

Client: ASAP Lead Paint Inspections
1 Arcadia Street
Suite 14
Dorchester, MA 02122

Received Date: 08/01/2022
Analyzed Date: 08/01/2022
Reported Date: 08/01/2022

Project/Test Address: 4297 Washington St #4; Roslindale, MA 02131

Collection Date: 07/30/2022

Client Number:
22-1252

Laboratory Results

Fax Number:
617-282-7783

Lab Sample Number	Client Sample Number	Collection Location	Surface	Total Pb (ug)	Wipe Area (ft ²)	Concentration (ug/ft ²)	Narrative ID
22-08-00025-001	1	RM 1 D1	FL	<5.00	1.00	<5.00	
22-08-00025-002	2	RM 1 D1	SL	<5.00	0.781	<6.41	
22-08-00025-003	3	RM 1 D1	WW	<5.00	0.479	<10.5	
22-08-00025-004	4	RM 5 A1	FL	<5.00	1.00	<5.00	
22-08-00025-005	5	RM 5 A1	SL	<5.00	0.781	<6.41	
22-08-00025-006	6	RM 5 A1	WW	<5.00	0.479	<10.5	
22-08-00025-007	7	CONTROL BLANK		<5.00	1.00	<5.00	

Environmental Hazards Services, L.L.C

Client Number: 22-1252

Report Number: 22-08-00025

Project/Test Address: 4297 Washington St #4; Roslindale, MA 02131

Lab Sample Number	Client Sample Number	Collection Location	Surface	Total Pb (ug)	Wipe Area (ft ²)	Concentration (ug/ft ²)	Narrative ID
----------------------	-------------------------	---------------------	---------	------------------	---------------------------------	--	-----------------

Method: ASTM E-1979-17/EPA SW846 7000B

Accreditation #:

Reviewed By Authorized Signatory: Melissa Kanode

Melissa Kanode

QA/QC Clerk

The condition of the samples analyzed was acceptable upon receipt per laboratory protocol unless otherwise noted on this report. Results represent the analysis of samples submitted by the client. Sample location, description, area, etc., was provided by the client. Results reported above in ug/ft² are calculated based on area supplied by the client. If the report does not contain the result for a field blank, it is due to the fact that the client did not include a field blank with their samples. These sample results do not reflect blank correction. This report shall not be reproduced except in full, without the written consent of Environmental Hazards Services, L.L.C.

ELLAP Accreditation through AEMA LAP, LLC (100420), NY ELAP #11714.

Legend	ug = microgram	ug/ft ² = micrograms per square foot	Pb = lead
	mL = milliliter	ft ² = square foot	



DELEADING INVOICE

Please completely and clearly fill out appropriate information:

Name (print) Bay State Environmental Services, Corp. Telephone (800)345-9850
Company: Bay State Environmental Services, Corp. Work/Cell (617) 401-1452
Address: 33 Endicott St, Lynn, MA. Zip Code 01902
Address of Deleading Work 4297 Washington St. #4 Roslindale, MA Zip code 02131

I hereby attest that all deleading activities and clean up were done in accordance with the Department of Labor and Workforce Development's Regulations, 454 CMR 22.00 and the Childhood Lead Poisoning Prevention Program's Regulations, 105 CMR 460.000.

Signature  Date: 07 /30/2022

Only complete section reflecting your authorization/license status

Deleading Contractor Bay State Environmental Services, Corp License#: ☒ DC 500046 Exp. Date 10/19/2022
☒ DS 900774 Exp. Date 10/14/2022
☒ LR 004514 Exp. Date 12/15/2026
Deleading Methods: ☒ Scraping ☐ Demolition ☐ Power Sanding ☐ Caustics
☐ Heat Gun ☒ Replacement ☒ Covering ☒ Making Intact
☐ Liquid Encapsulation ☐ Other _____

Work was done in the following rooms: Deleading & Post Deleading Cleaning work

Work was done on the following types of components: Deleading & Post Deleading Cleaning work

Start Date: 07 /12/22 Finish Date: 07 /30/2022 Cost: \$ 5,075.00

RRP w/additional Moderate Risk Training _____ Authorization # MR-
Issuance Date: / /
Moderate Risk Deleader (owner/agent) _____ Authorization # - ☐ OM ☐ AM
Issuance Date: / /
Deleading Methods: ☐ Replacement ☐ Making Intact (interior) ☐ Capping Baseboards
☐ Covering ☐ Making Intact (exterior) ☐ Liquid Encapsulation

Work was done in the following rooms: _____

Work was done on the following types of components: _____

Start Date: / / Finish Date: / / Cost: \$ _____ (Doesn't Include Owner's Labor)

Low Risk Deleader (owner/agent) _____ Authorization # - ☐ OL ☐ AL
Issuance Date: / / ☐ OE ☐ AE
☐ OB ☐ AB
Deleading Methods: ☐ Covering ☐ Liquid Encapsulation ☐ Capping Baseboards
☐ Replacement (ONLY doors, cabinet doors, shutters, shelves not affixed, drawers, windows on hinges)

Work was done in the following rooms: _____

Work was done on the following types of components: _____

Start Date: / / Finish Date: / / Cost: \$ _____ (Doesn't Include Owner's Labor)