MODEL LEAD ABATEMENT PLAN FOR RESIDENTIAL DWELLINGS

A. Background Information Date Plan Submitted: Address of Property: Apartment # or #s: City: ______ State: _____ Zip: _____ Plan Prepared by: Owner Planner Project Designer **If Planner Project Designer** Name: _____ Certificate Number: _____ Telephone: () ______ Address: _____ City: State: Zip Code: **Identify Inspection Report Used to Develop Abatement Plan** (Attach copy if not already provided to local health department) Date(s) of Inspection: **If Consultant Contractor** Name of Consultant Contractor: _____ License Number: _____ Telephone Number: () _____ Name of Inspector: _____ Certificate Number: _____ **If Health Department** Name of Health Department: Name of Inspector: ______ Telephone Number: () ______ B. Owner/Owner Agent Information Name of Owner(s): Address: City: _____ State: ____ Zip Code: _____ Home Telephone: () _____ Work Telephone: () _____

Owner's Designated Agent (if applicable):

Name: ______ Title: _____

Telephone Number: () _____

C. Resident Information Name(s): ____ Telephone Number: () _____ Number of Children Under Six Years Old: _____ Will Residents Be Relocated? YES NO If Residents Will Not Be Relocated, Provide Justification (Use additional sheets if necessary) If Residents Will Be Relocated, Provide The Following)_____ Telephone Where Residents Can Be Reached If Relocated: (Address of Relocation: _____ City: State D. Abatement Contractor Information Who will conduct abatement? Owner Abatement Contractor **If Abatement Contractor Will Conduct Abatement** Has contractor been selected? YES NO If yes, provide the following: Contractor Name: _____ Contractor License Number: _____ Contact Person: _____ Address: _____ City: _____

E. Repairs Prior To Abatement

PLEASE NOTE:

Water Leaks: Must be corrected prior to abatement regardless of the method of abatement. Uncorrected
water leaks can cause encapsulating material to fail if the underlying lead painted surface deteriorates.
Moisture can also cause paint on stripped surfaces (and unabated surfaces) to fail and expose lead residue
that may remain on the substrate after stripping by heat, caustic chemicals, solvents or scraping.

State: __ Zip Code: _____ Telephone Number: () _____

- Heating Systems: Inadequate heat after abatement may lead to failure of encapsulants and paint. Therefore
 heating systems must be repaired. Prior to abatement, forced air systems must be shut down and sealed to
 prevent transport of lead contamination from the abatement area to other areas of the residence.
- **Electricity**: Lack of electricity on the site can impede abatement because of inadequate lighting and may limit the options that are available for on-site paint removal. Electricity must be restored.

What Components Or Mechanical Systems Need To Be Repaired Prior To Abatement? (Check appropriate item[s])
Water leaks, Roof, Plumbing, Wall surfaces, etc.
Heating system
☐ Electrical system
Any other conditions that require repair so as not to impede abatement (Please indicate)
No prior repairs required.

F. Abatement Technique(s) To Be Used

Identify which abatement technique(s) will be used on the attached forms. The three general strategies for lead paint abatement are removal, replacement, and encapsulation. (See pages 9, 10 and 11 for the relevant forms.)

- A. Removal (**REM**):(stripping of paint)
- B. Replacement (REP): (removal of architectural component & replacement with lead free component)
- C. Rigid Encapsulation (RENCAP): (e.g. enclosure using materials such as siding, paneling, etc.)*
- D. Liquid Encapsulation (LENCAP): (provide product technical information)*
- E. Cementitious Encapsulation (CENCAP): (provide product technical information)*

*Note: If liquid, cementitious or rigid encapsulants are to be used, the associated surfaces must be periodically monitored in the future per a schedule that is established within a lead management plan. Additionally liquid and cementitious encapsulants must be authorized for use by the Connecticut Department of Public Health (DPH) and listed on the DPH Registry of Authorized Encapsulant Products.

<u>Paint Removal</u> means the stripping of lead paint from the surfaces of components. The following are some of the paint removal processes that can be used; chemical stripping, mechanical stripping, and wet scraping/wet sanding.

- Chemical stripping: There are a variety of paint removal products that are available from various
 manufacturers. Commonly the stripper is applied to the building component and later removed by manual
 scraping. All paint layers must be removed. Follow manufacturer's directions on how to apply such products.
- Mechanical stripping: This technique requires the use of power tools. Examples of such equipment are;
 Needle guns, Vibrating, belt and rotary sanders; Abrasive blasting equipment; and other types of impact
 strippers that employ the use of steel studs of different sizes and shapes, that rotate in an enclosed head to
 impact the painted surface. See manufacturer's instructions on how to use this equipment. (Note:
 Mechanically powered abatement equipment requires the use of HEPA-equipped vacuum attachments to
 remove dust generated during the use of the equipment.)
- Wet Scraping/Wet Sanding: Wet scraping or wet sanding manually removes loose and peeling lead paint.
 Paint chips and dust that are generated during these procedures, must be controlled, to avoid further

distribution of contaminants to adjacent areas. Wet scraping or sanding involves misting the peeling paint before scraping or sanding, and thus reducing the amount of lead dust that is generated during these processes. Surfactants (wetting agents) may be added to the water to facilitate clean up.

Heat Gun: This removal technique involves the softening of the paint with a heat gun and then scraping the
paint off. To prevent vaporization of the lead contained in the paint, the temperature of the heat gun must
not exceed 700 degrees Fahrenheit per DPH regulations.

Note: If paint removal is selected, x-ray florescence analyzer testing of the surface after the paint has been removed is required to ensure toxic levels of lead no longer remain on the surface(s).

Replacement means the removal of components such as windows, doors, and trim that have lead painted surfaces and the installation of new components that are free of lead containing paint. Replacement may be feasible for many exterior and interior architectural components.

<u>Encapsulation</u> refers to processes that make lead paint inaccessible, by covering or sealing lead painted surfaces. If the lead paint is peeling or deteriorating then some wet scraping and/or wet sanding is necessary prior to encapsulation (see wet scraping/wet sanding in the description of paint removal).

Liquid and cementitious encapsulants must be listed on the DPH Registry of Authorized Encapsulant Products, to be considered for use. The following are some types of rigid encapsulating materials: gypsum dry wall, fiberglass, wood and vinyl siding. Seams must be sealed to prevent the escape of lead dust.

The following cannot be used as encapsulants:

- A new coat of paint or primer
- Wall paper coverings
- Contact paper

Any area that is to be abated must be properly contained with materials such as 6 mil polyethylene sheeting to prevent further contamination of the dwelling or environment and to facilitate post-abatement clean up.

G. Dates of Abatement Project

Estimated Starting Date of Abatement Project:
Estimated Completion Date of Abatement Project:

Note: Written notice shall be given to the local health department at least 5 working days prior to the actual starting date.

H. Notification to the State Historic Preservation Office

If property is over 50 years old, fill out form (click on link below) and submit to address below. https://portal.ct.gov/-/media/DECD/Historic-Preservation/ProjectNotificationForm 2018.pdf?la=en

Year Built:		
Please note: Notification is required	l If over 50 years old	
Form sent YES	NO 🗌	
If Yes, Date Sent:	Response Received? YES (attach copy)	NO 🗌
Date Response Received:		
Send Notification to:	State Historic Preservation Office Attn: Environmental Review 450 Columbus BLVD, Suite 5 Hartford, CT 06103	
	For questions, contact Todd Levine at	

I. Notification Procedure

Written notice will be given to the resident(s) 5 working days prior to the abatement start date. The notice shall:

860-500-2337

- Inform the residents of their rights and responsibilities per the statutes and regulations.
- Inform residents which surfaces or soil areas are to be abated.

Additionally, warning signs shall be posted at all entrances to and exits from the abatement area, prior to abatement.

Note: Submit copies of the notice and the warning sign to be used.

J. Containment of Work Area (Interior and Exterior)

Moveable objects belonging to residents must be removed from the abatement area. The belongings should be stored in an easily accessible location.

Cover and seal all non-work surfaces with 6 mil polyethylene as follows:

- **a.)** non-movable objects.
- **b.)** air system(s) heating, ventilation, air conditioning (HVAC).
- **c.)** entrances to abatement areas.
- d.) floors.
- **e.)** exterior grounds and surfaces (use 6-mil polyethylene sheeting to prevent release of lead into the environment).

Note: The contractor and/or owner is responsible for using the best available engineering controls to reduce the potential for emissions to the exterior of an abatement area. Engineering controls may include but are not

containment area(s), use of wet scraping/wet sanding methods and use of vacuum HEPA attached power tools. Describe proposed engineering controls: K. Cleaning After Lead-Based Paint Abatement (Prior to Clearance Testing) Procedure: 1. Wet clean the containment area. 2. Carefully remove the polyethylene covering. 3. HEPA vacuum area and wash with TSP detergent or other effective non-TSP cleaner. 4. After 24 hours from the time when active abatement has ceased: HEPA vacuum, wash with TSP or other effective non-TSP cleaner and HEPA vacuum again. L. Waste Disposal (Hazardous) For waste that meets the Resource Conservation and Recovery Act (RCRA) criteria for hazardous waste (utilizing appropriate characterization and testing), indicate: Disposal Site: Address: _____ City: _____ State: Zip Code: Telephone Number: () Type of waste; Liquid: Solid: Projected Amount of Waste: Note: Lead contamination detected in soils located within the property boundaries of a household, the source of which was the result of routine residential maintenance (intentional paint removal) and/or the natural weathering or chalking of lead-based paint, is exempt from classification as a hazardous waste under the household waste exclusion found at 40 C.F.R. paragraph 261.4(a). These soils may be managed on-site or disposed of off-site without invoking RCRA Subtitle C. (C.F.R.) Code of Federal Regulations. *Note:* Further questions regarding hazardous waste issues should be directed to: State of Connecticut - Department of Energy and Environmental Protection **Waste Management Bureau** 79 Elm Street, Hartford, CT 06106-5127 Telephone: (203) 424-3023 M. Worker Protection Note: Workers must use proper personal protective equipment per the OSHA Lead in Construction Standard (29CFR 1926.62) and state regulation. Full body covering (suits) with hood and shoe covering attached should be used to prevent lead dust contamination. Disposable coveralls that are used one time provide effective protection. Indicate the level of protection that is to be provided: Disposable: **Body Covering: Head Covering:** Disposable:

limited to, proper containment and control of the abatement area(s), provision of negative pressure within

Hand Covering:		Disposable:			
Shoe Covering:		Disposable:			
Respirator w/HEPA Filte	er: 🗌 💮 Ty	ype of Respirator:			
Note: Neither smoking, eating of work area. Use of personal clot					ithin the
Indicate available washing faci	lities:	Hand washing:	Sh	owers:	
N. <u>Clearance Testing</u>					
Prior to re-occupancy, a visual i analyzed from floors, window s and sampling must be performed code enforcement official.	ills and windov	v wells in each area v	vhere abatement	has occurred. Thi	is inspection
Visual inspection and sampl assessor:	ing to be perfo	rmed by a certified lo	ead inspector or	inspector risk	
Name:		Connecticut Certific	ate # :		
Contractor Name:		_ Connecticut License	e #:		
Address:		City:			-
State: Zip Code:	Telep	hone Number: ()		
		OR			
Visual inspection and sampl	ing to be perfo	rmed by an authoriz	ed code enforcer	nent official	
O. <u>Soil Abatement</u> (Provide diagram of expose	ed soil areas to	be abated)			
1. Soil lead levels between 400	ppm and 5000	O ppm: Check abaten	nent technique(s) to be used.	
Plant grass or shrubbe	ry to reduce ex	oposure to bare soil.			
Permanent barrier: as	ohalt or cemer	it.			
Cover three to six inch	es with gravel	or bark mulch.			
Restrict access: (fencir	g; specify type	& height			_)
Restrict access: (specif	y barrier)
Excavate, remove and	replace contar	minated soil. An exca	vation of betwee	n three and eight	inches is a
generally acceptable pract	ice. (Specify de	epth of excavation)	ı	
Relocate play equipme	ent.				

2. Soil lead levels greater than or equal to 5000 ppm: Check abatement technique(s) to be used.
Excavate, remove and replace contaminated soil. An excavation of between three and eight inches is a generally accepted practice (specify depth of excavation)
Permanent barrier: asphalt or cement
Note: All soil abatement techniques except removal and replacement require ongoing periodic monitoring at a frequency that is established within a written management plan.
P. <u>Abatement Forms</u>

The following three forms may be used as templates for abatement plans. The forms may be modified or expanded depending upon the specifics of individual projects.

MODEL LEAD ABATEMENT PLAN FOR RESIDENTIAL DWELLINGS

INTERIOR ABATEMENT

☐ KEY: DESIGNATE A, B, C, D SIDES** OF BUILDING OR NORTH=N, SOUTH=S, EAST=E, WEST=W

☐ RENCAP=RIGID ENCAPSULATION; LENCAP=LIQUID ENCAPSULATION; CENCAP=CEMENTITIOUS ENCAPSULATION; REM=REMOVAL; REP=REPLACEMENT

SURFACE/COMPONENT** REQUIRING ABATEMENT

				30	KFACE/C	DIVIPUNEN	I · · KEQUII	RING ABATE	IVIEIVI				
ROOM (Provide room number **)	Wall	Floor	Base- board	Door (Entire Unit)	*Door Comp.	Window (Entire Unit)	Window Sill	*Window Comp.	Stair Tread	Stair Riser	Ceiling	Chair Rail	Other (List)
Bedroom #													
Bedroom #													
Bedroom #													
Living room #													
Bathroom #													
Bathroom #													
Dining Room #													
Kitchen #													
Den #													
Hall #													
Stairway #													
Stairway #													
Pantry #													
Other:#													

^{**} Per Inspection Report * Specify Component (e.g. casing, jamb) Address: ______

MODEL LEAD ABATEMENT PLAN FOR RESIDENTIAL DWELLINGS

ABATEMENT OF EXTERIOR/OUTBUILDINGS

☐ KEY: DESIGNATE A, B, C, D SIDES** OF BUILDING OR NORTH = N, SOUTH = S, EAST = E, WEST = W

□ RENCAP=RIGID ENCAPSULATION; LENCAP=LIQUID ENCAPSULATION; CENCAP=CEMENTITIOUS ENCAPSULATION; REM=REMOVAL; REP=REPLACEMENT SURFACE/COMPONENT**REQUIRING ABATEMENT

Wall	Floor	Door (Entire Unit)			*Window	Stair Tread	Stair Riser	Railing	Bulkhead	Other (List)
		(Little Offic)	Comp.	Lentine Offici	Comp.		I I	1	1	
	Wall	Wall Floor		Wall Floor Door *Door	Wall Floor Door *Door Window	Wall Floor Door *Door Window *Window	Wall Floor Door (Entire Unit) *Door (Entire Unit) Comp. (Entire Unit) Comp. Stair Tread	Wall Floor Door *Door Window *Window Stair Tread Stair Riser	Wall Floor Door *Door Window *Window Stair Tread Stair Riser Railing	Wall Floor Door *Door Window *Window Stair Tread Stair Riser Railing Bulkhead

^{**} Per Inspection Report * Specify Component (e.g. casing, jamb) Address:_______

MODEL LEAD ABATEMENT PLAN FOR RESIDENTIAL BUILDINGS

ABATEMENT OF COMMON AREAS

☐ KEY: DESIGNATE A,B,C,D SIDES** OF BUILDING OR NORTH=N SOUTH=S EAST=E WEST=W

☐ RENCAP=RIGID ENCAPSULATION; LENCAP=LIQUID ENCAPSULATION; CENCAP= CEMENTITIOUS ENCAPSULATION; REM=REMOVAL; REP=REPLACEMENT

SURFACE/COMPONENT**REQUIRING ABATEMENT

Area**	Wall	Floor	Base- board	Door (Entire Unit)	*Door Comp	Window (Entire Unit)	Window Sill	*Window Comp.	Stair Tread	Stair Riser	Ceiling	Chair Rail	Other (List)

**Per Inspection Report	* Specify Component (e.g. casing, jamb)	Address:
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