

**Lead  
Project  
Notification**

2008 Revision

State of Maine  
Department of Environmental Protection  
Lead & Asbestos Hazard Prevention Program  
17 State House Station, Augusta, ME 04333  
TEL (207) 287-2651 FAX (207) 287-6220

**FORM  
L**

**Page 1 of 2**

**Important Notice:** The notification submitter must submit a complete written notification to the Department at least 5 working days prior to the start of the abatement project, including set-up or on-site preparation activities. This notification must be typewritten or easily legible. An incomplete notification is not acceptable & therefore not of record.

<b>1. Project Code</b>  (Assigned by notification submitter)	<b>2. Type of Notification</b> <input type="checkbox"/> Initial (Original) <input type="checkbox"/> Courtesy (Z) <input type="checkbox"/> Lead Smart Renovation (R)	<b>3. Containment Level</b> (Check all that apply) <input type="checkbox"/> Level 1 (1) <input type="checkbox"/> Exterior Work Area Preparations (3) <input type="checkbox"/> Level 2 (2) <input type="checkbox"/> Window Preparation Levels (4) <input type="checkbox"/> Standard Variance <input type="checkbox"/> Non-Standard Variance
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<b>4. Lead Abatement Contractor</b> Name Address City                      State                      Zip Contact TEL                      FAX	<b>5. Facility Owner</b> Name Mailing Address City                      State                      Zip Contact TEL                      FAX
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<b>6. Facility Location</b> (Where abatement is to take place) BLDG Name Floor and/or Rm.# Physical Address City                      State                      Zip	<b>7. Facility Description</b> Present Use Prior Use BLDG Size                      No. Floors BLDG Age
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<b>8. Scheduled Dates for Lead Abatement Project</b> Project Start Date (mm/dd/yy) Project Completion Date (mm/dd/yy)	<b>9. Project Work Days</b> <b>Weekdays</b> (Check all that apply) <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> T <input type="checkbox"/> F  <b>Weekend</b> (Check all that apply) <input type="checkbox"/> Sat <input type="checkbox"/> Sun
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<b>10. Project Work Hours</b> AM to PM (Show actual hours)
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**11. Operation** (Check all that apply)

<input type="checkbox"/> Interior Paint Removal (B)	<input type="checkbox"/> Encapsulation (J)	<input type="checkbox"/> Water (P)
<input type="checkbox"/> Exterior Paint Removal (C)	<input type="checkbox"/> Enclosure (K)	<input type="checkbox"/> Soil (S)
<input type="checkbox"/> Interior Window Removal (F)	<input type="checkbox"/> Component Removal (H)	
<input type="checkbox"/> Exterior Window Removal (G)	<input type="checkbox"/> Carpet Abatement (Q)	

<b>12. Lead Project Type</b> (Check all that apply) <input type="checkbox"/> DHS Ordered (A) <input type="checkbox"/> Rental (F) <input type="checkbox"/> MSHA Grant (B) <input type="checkbox"/> Commercial (C) <input type="checkbox"/> Other HUD (G) <input type="checkbox"/> Industrial (I) <input type="checkbox"/> Daycare (D) <input type="checkbox"/> Public (H) <input type="checkbox"/> Private Residence (E) <input type="checkbox"/> Steel Structure (J)	<b>ME DEP USE ONLY</b> _____ Mailed _____ FAX _____ Hand Delivered  Date Received _____
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**Page 2 of 2**

**Project Code**

(As listed on page 1)

**13. Occupant Location**

- Inside building but outside work area
- Outside building but returning at day's end
- Outside building until all work is completed (relocated)

**14. Design Consultant** (complete as applicable)

Name  
Address  
City State Zip  
Contact  
TEL FAX

**15. Lead Inspection** (ME licensed Lead Inspector)

Name  
Address  
City State Zip  
Contact  
TEL FAX

**16. Project Clearance**

**Visual assessment by:** (Lead Inspector)  
  
**Dust Testing by:** (Lead Inspector)

**17. Waste Transporter**

Name  
Address  
City State Zip  
Contact  
TEL FAX

**18. Disposal Site**

Name  
Address  
City State Zip  
Contact  
TEL FAX

**19. Important Notice to Lead Abatement Contractors Concerning this Notification**

- A weekly updated schedule for each lead abatement project shall be faxed to the Department each Monday morning until the lead abatement project is complete.
- Lead Abatement Contractors are expected to be on-site for all work days for the dates set forth in this notification. The contractor must notify the Department no later than 24 hours prior to any change in schedule.
- Whenever there is a lapse in abatement activity at a project site of more than 10 days, a new project notification must be submitted to the Department.
- A single project notification may be submitted for multi-unit projects provided there is not a lapse of abatement activity of more than 10 days between units and the Department is sent a weekly work schedule.

**20. Certification (Notification Submitted by)**

**I certify that to the best of my knowledge, the information contained in this notification is true and accurate, and that the lead abatement contractor will be/has been contracted to implement work practices as required by Maine DEP Chapter 424, Lead Management Regulations.**

\_\_\_\_\_  
Signature

Print Name

Date

Mailing Address

City State Zip  
TEL FAX