

MARYLAND DEPARTMENT OF THE ENVIRONMENT

883421

LEAD PAINT RISK REDUCTION (MDE FORM 330) INSPECTION CERTIFICATE NO.

MDE TRACKING NO. 358808 MDE PROPERTY NO. (Include county code prefix.) 03-09-02-4044-004 OWNER NAME 3203 Independence LLC  
 Street Address 3203 Independence Street SFP Baltimore Unit No. 21218 City 03 Zip Code 1890 County 1890 Property Construction Date

The Maryland accredited lead inspector must mark an inspection category 1, 2, 3, or 5 and mark the appropriate inspection method. Only ONE category and method are to be marked. The following attachments are required to be submitted with the certificate: Form C, laboratory results, and diagrams for Full Risk Reduction, and Forms B and C, original signed copy of Supervisor's Statement of Work, laboratory results, and diagrams collected for Modified Risk Reduction. Form E for Lead Free, which shall include a \$10 per unit processing fee for each certificate. To be paid to: P.O. Box 1417, Baltimore, MD 21203. The certificate shall be signed by the inspector who performed the inspection. Inspection certificates and all required attachments must be submitted to MDE within 10 days following Lead Free and Lead Safe Inspections and within 10 days following the receipt of dust sample results for Full and Modified Risk Reduction Inspections. Copies of all inspection records shall be maintained for at least 5 years by lead inspection contractors. Maximum penalties will be pursued by MDE for any falsified documentation that is received by MDE. Indicate "0000" if Property Construction Date is unknown. Lead paint inspection contractors **must** mail inspection certificates and the supporting documentation for inspection certificates to: P.O. Box 943, Jessup, MD 20794.

INSPECTION CATEGORIES

<input type="checkbox"/> <b>1. Lead Free</b>	<input checked="" type="checkbox"/> <b>2. Full Risk Reduction</b>	<input type="checkbox"/> <b>3. Modified Risk Reduction</b>	<input type="checkbox"/> <b>5. Lead Safe</b>
<p><b>Methods</b></p> <input type="checkbox"/> <b>A. One Time Only</b> (Interior & Exterior) <b>OR</b> <input type="checkbox"/> <b>B. Limited</b> (Interior Lead Free Only) Passing Re-inspection required no later than: ___/___/___ ___ Number of Pre-1950 Lead Free Units ___ Number of Post-1949 Lead Free Units	<p><b>Methods</b></p> <input checked="" type="checkbox"/> <b>A. Dust Inspection</b> <b>OR</b> <input type="checkbox"/> <b>D. Dust Inspection</b> with Exterior Waiver  Passing Re-inspection (Form D and Supervisor Statement of Work) required no later than 04 / 30 / ___ unless otherwise noted in local code. <b>OR</b> <input type="checkbox"/> <b>E. Dust Inspection</b> with Lead Free Exterior	<p><b>Methods</b></p> <input type="checkbox"/> <b>B. Visual Inspection <u>and</u> Dust Inspection</b> <b>OR</b> <input type="checkbox"/> <b>C. Visual Inspection <u>and</u> Dust Inspection</b> with Exterior Waiver  Passing Re-inspection (Form D and Supervisor Statement of Work) required no later than 04/ 30 / ___ unless otherwise noted in local code. <b>OR</b> <input type="checkbox"/> <b>D. Visual Inspection <u>and</u> Dust Inspection</b> with Lead Free Exterior	<p><b>Methods</b></p> <input type="checkbox"/> <b>A. Dust Inspection</b> <b>OR</b> <input type="checkbox"/> <b>B. Dust Inspection <u>and</u> Visual Inspection</b> <b>OR</b> <input type="checkbox"/> <b>C. Dust Inspection</b> with Lead Free Exterior <b>OR</b> <input type="checkbox"/> <b>D. Dust Inspection <u>and</u> Visual Inspection</b> with Lead Free Exterior <b>AND</b> Verification that windows are lead free or have been treated so friction surfaces are lead free.

**PASSED** Based on the findings of the attached inspection report(s), I certify that the **property/unit** meets the certification criteria at this time. (circle property or unit)

**FAILED** Based on the findings of the attached inspection report(s), the **property/unit** fails to meet certification criteria at this time. (circle property or unit)

I certify that I inspected the above listed **property/unit** on 11/2/19 at 1:35 a.m./p.m. under Title 6, Subtitle 8 of the Environment Article, Annotated Code of MD.

Kevin E. Jones Inspector's Name    [Signature] Inspector's Signature    10196 Accreditation No.    07/25/2021 Accreditation Exp. Date    K2J Services, Inc. Inspection Contractor Name    17226 Accreditation No.    10/26/2020 Accreditation Exp. Date