## FORM E- FEE LEAD-FREE INSPECTION FEE PAYMENT FORM

(One Per Certificate)

For Bank Use Only: COMPT.OBJ. 5714629

MDE TRACKING #:	CERTIFICATE #:	INSP. ACCRED. #:
0363318	958210	17124
PROPERTY #:	DATE CERTIFIED LEAD-FREE:	INSP. CONTRACTOR #:
03-15-34-3347E-027	8/6/19	17146

INSTRUCTIONS: It is the inspector's responsibility to ensure that this form is complete and correct before giving it to the property owner. Prior to submitting, the inspector must complete the owner information below if there is no tracking number or if it is not known by the owner. Do not delay submission. The owner is responsible for paying a \$10.00 per unit Lead-Free processing fee. The inspector shall advise the owner of their responsibility in that regard and supply the property owner with this Fee Payment Form. NOTE: In accordance with the Annotated Code of Maryland, Environment Article §6 – 843 (a)(3)(iii) the owner is responsible for sending a \$10.00 per unit processing fee for submission of a Lead-Free inspection report. Section 6 – 843 (d) provides that the penalty for failure to pay any fee imposed by the law is a civil penalty of up to triple the amount of the unpaid fee together with all costs of collections, including attorney's fees. IF A MULTIUNIT BUILDING OR MULTIBUILDING COMPLEX IS BEING CERTIFIED AS LEAD-FREE UNDER THIS CERTIFICATE # THEN, A COPY OF "FORM E- APPENDIX" MUST BE SUBMITTED WITH THIS "FORM E- FEE". This will indicate what units are being paid for.

FEE PAYMENT	(Inspector must complete this section)		
Please list MDE Tracking # on the	TOTAL # of units certified Lead-Free_		
check, canceled check will serve as the	(Processing Fee per unit)	X \$10.00	
receipt.	TOTAL PAYMENT DUE to be Submitted_	\$ 20.00	

Return the completed form and payment to:

MARYLAND DEPARTMENT OF THE ENVIRONMENT P.O. BOX 1417 BALTIMORE, MD 21203

The following information is required **ONLY IF** there is no **MDE Tracking** # above. Get MDE Tracking # by calling 1-800-776-2706 or 410-537-4199. **The inspector must complete this section.** If any question does not apply, mark N/A.

Owner Name	Last, First, MI:
Owner Address	
City, State, Zip	
Owner Telephone #	
Property Address	
City, State, Zip Code	
Please List County	
Property Mgr. Name	
Property Mgr. Address	
Mgr. Telephone#	

Form Number: MDE/LMA/COM.047 Date Revised: 12/09/2015 TTY Users: 1-800-735-2258

MARYLAND DEPARTMENT OF THE ENVIRONMENT								
LEAD PAINT RISK REDUCTION (MDE FORM 330) INSPECTION CERTIFICATE NO. 958210								
0363318 03-15-34-3347E-027 TNT Homes, LLC								
MDE TRACKING NO.	MDE PROPERTY NO. (I	nclude county	- 11		RNAME	- 11	1000	
2603 Park Heig	hts Terr	units	15altimore	21215	Balt	-01	1920	
Street Address		Unit No.	City	Zip Code	County	•	rty Construction Date	
The Maryland accredited lead inspector must mark an inspection category 1, 2, 3, or 5 and mark the appropriate inspection method. Only <b>ONE</b> 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 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 <b>must</b> mail inspection certificates and the supporting documentation for inspection certificates to: P.O. Box 943, Jessup, MD 20794.  INSPECTION CATEGORIES								
1. Lead Free	2. Full Risk Ro	eduction	3. Modified Risk	Reduction	5. 1	Lead Safe		
Methods	Methods		Method	S		Meth	ods	
A. One Time Only (Interior & Exterior) OR  B. Limited (Interior Lead Free Only) Passing Re-inspection required no later than:    Q / Z    Number of Pre-1950 Lead Free Units Number of Post-1949 Lead Free Units	OR  D. Dust Inspection with Exterior Wair  Passing Re-inspection (For Supervisor Statement of Warrequired no later than 04 / unless otherwise noted in 1  OR  E. Dust Inspection was Lead Free Exterior	rm D and fork) 30 / ocal code.	□ B. Visual Inspection a Inspection  OR  □ C. Visual Inspection a Inspection with Extended a Inspection (Form Statement of Work) required 04/30/ unless otherwise code.  OR  □ D. Visual Inspection a Inspection with Le	nd Dust erior Waiver n D and Supervisor n no later than e noted in local	□ B. Duss □ C. Dus □ D. Dus with  Verification	OR t Inspection wit OR t Inspection and h Lead Free Ext AN on that window	d Visual Inspection th Lead Free Exterior d Visual Inspection erior	
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 2/0/19 at 3:30 a.m./p.m. under Title 6, Subtitle 8 of the Environment Article, Annotated Code of MD.								
Norman Croop Journan	Cke nil	3 9	16/70 Nov	Man Crook on Contractor Name	ce l	7146	916/20 Accreditation Exp. Date	

Form Number: MDE 330, Revised: 04/2017

## MARYLAND DEPARTMENT OF THE ENVIRONMENT

Lead Poisoning Prevention Program • Lead Compliance & Accreditation Division 1800 Washington Boulevard • Suite 630 • Baltimore Maryland 21230 410-537-3825 • 1-800-633-6101 • www.mde.state.md.us\lead

## FORM E- LEAD-FREE INSPECTION SUMMARY REPORT

SCHOOL OWN IC #.	CERTIFICATE #:	INSPECTOR ACCRED#:	INSPECTOR NAME (PRINTED):				
MDE TRACKING #:	958210	17143	Norman Crooke				
0363318 MDE PROPERTY #:	SITE ADDRESS (INCLUDE: STREET NUMBER,	INSP. CONTRACTOR ACCRED #:	INSP. CONTRACTOR NAME (PRINTED):				
07-15-34-3347E-	NAME, TOWN, AND ZIP CODE): 2603 Park Heights Terr Units Baltimore 21215	17146	Norman Crooke				
known by the owner) prior	e inspector's responsibility to ensure that this form is conto submitting. This form is to be submitted to MDE and 10.00 per unit Lead-Free processing fee. The inspector stase note, in accordance with COMAR 26.16.02.05M, the	all advice the owner of their responsibility	ity in that regard and supply the property owner with				
SECTION 1, Interior Surfaces:  If multiunit building or multibuilding complex is being certified as Lead-Free under this certificate # then, the "Form E- Appendix" must be submitted.  Total # of Units this Certificate Applies to: Total # Units Surveyed: Total Parcels: Of							
Total # of XRF Reading	s: 179 Total # of Inconclusive XRF Reading	s: Total # of Paint Chip	Samples Collected				
SECTION 2. Exterio	or Surfaces (Includes Common Areas): CH	IECK ONE BOX ONLY:					
A '	ne only): Exterior is Lead-Free,	OPTION B (limited): Exterior is reflaking paint. Must be reinspected w	tot Lead-Free but free of any chipping, peeling vithin two years on or before expired.				
Total # of XRF Reading	11	lings: Total # Paint Chip	Samples Collected:				

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## FORM E- APPENDIX **INVENTORY OF LEAD-FREE UNITS**

Page	of	(
	-	1

If a multiunit building or multibuilding complex is being certified as Lead-Free under this certificate # then "Form E-Appendix" must be submitted with "Form E- Lead-Free Inspection Summary Report" AND "Form E- Fee". List ALL UNITS that are being certified as Lead-Free (attach additional sheets if necessary).

MDE Trackin	ng#: <u>03</u>	63318	Ce	ertificate #:	958210		Parcel	of
Date Certified Lead-Free: 8/6/19 Number of Units Certified Lead-Free: 2								
Property Name: 2603 Park Heights								***************************************
Street Number	Street Name			Unit Number	City, State, Zip Code			
2603	Park	Heights	Terr	1	Baltinuse,	MD	21215	
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Form Number: MDE/LMA/COM.047 Date Revised: 12/09/2015

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