| LEAD PAINT RISK REDUCTION (MDE FORM 330) INSPECTION CERTIFICATE NO. 624604  |   |                 |  |                    |            |              |                                 |
|---|---|-----------------|--|--------------------|------------|--------------|---------------------------------|
|   | 0325067274 0  | 4 330)          | inspection (                             | •                  |            |              | -espesses LLC                   |
| MDE TRACKING NO.  | MDE PROPERTY NO. (1. 1.                                       | · (1 )          |  | Angelozz:          | Mc Cormia  | اد لاما      | -cipises LCC                    |
| Station & Peter   | PS a  | te county c     | ode prefix.)                             | OWNER NAM          |            | <b>^</b>     | 16.13                           |
| Street Address  |   |                 | Bulthara                                 | 21225              | But        | Cin          | 1943                            |
|   | Unit  |                 | City                                     | Zip Code           | County     |              | 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 E for Lead Free. Form C, laboratory results, and diagrams for Full Risk Reduction, and 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 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 Box 943, Jessup, MD 20794. |   |                 |  |                    |            |              |                                 |
| INSPECTION CATEGORIES   |   |                 |  |                    |            |              |                                 |
| 1. Lead Free  | 2. Full Risk Reducti  |                 | 3. Modified Risi                         |                    |            | 5. Lead S    | afe                             |
|   | 1   |                 |  |                    |            |              |                                 |
| Methods   | Methods   | <del> </del>  - | Method                                   | ie                 | <b></b>    |              | Methods                         |
| ☐A. One Time Only   | ✓A. Dust Inspection   | -               |  | · ·                |            |              |                                 |
| (Interior & Exterior)   | Bust inspection   |                 | ☐B. Visual Inspection                    | and Dust           | ∐A.        | Dust Inspec  | ction<br>OR                     |
| OR  | ÖR  | AS 87           | Inspection OR                            | - AND STREET       |            | Dust Inches  | tion and Visual Inspection      |
| ☐B. Limited   | D. Dust Inspection  |                 |  |                    | القلياني ا | Pust Hisher  | OR                              |
| (Interior Lead Free Only)   | with Exterior Waiver  |                 | ☐C. Visual Inspection                    |                    |            | Dust Inspe   | ction with Lead Free Exterior   |
| Fassing Re-inspection   |   |                 | Inspection with Ex                       | terior Waiver      |            | -            | OR                              |
| required no later than:   | Passing Re-inspection (Form D and                             | 1 🔭 🗀           | Passing Re-inspection (For               | n D and Supervisor |            | Dust Inspe   | ction and Visual Inspection     |
| <del>''</del>   | Supervisor Statement of Work) required no later than 04 730 / |                 | Statement of Work) require               | d no later than    |            | with Lead    | Free Exterior                   |
| Number of Pre-1950  | unless otherwise noted in local cod                           | 1 1             | 04/30/ unless otherwis                   | e noted in local   |            |              | AND                             |
| Lead Free Units   | OR  | _               | OR                                       |                    | Verif      | ication that | windows are lead free or have   |
| Number of Post-1949   | ☐E. Dust Inspection with                                      |                 |  | and Dust           | been       | treated so f | riction surfaces are lead free. |
| Lead Free Units   | Lead Free Exterior  | '               | D. Visual Inspection a Inspection with L |                    |            |              |                                 |
| PASSED Based on the C.  |   |                 |  | cud i ice Exterior |            |              |                                 |
| 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)  |   |                 |  |                    |            |              |                                 |
| Dased on the findings of the attached inspection report(s) the sum of the time (single-preparation unit)  |   |                 |  |                    |            |              |                                 |
| rertify that I inspected the above listed property funit on 1 /16 /20.3 at 10:00 (a.m./p.m. under Title 6, Subtitle 8 of the Environment Article, Annotated Code of MD.   |   |                 |  |                    |            |              |                                 |
|   |   |                 |  |                    |            |              |                                 |
| Zri Pollank B. All 134110 Was a war   |   |                 |  |                    |            |              |                                 |
| pector's Name Inspector's Signatur  | 738.4   | 11-25-          | 2014 Dr                                  | Lity Inspection    |            | 9830         | 11-29-204                       |
| mspecial 3 Signatur   |   | creditation     |  | on Contractor Name | e Accree   | litation No. | Accreditation Exp. Date         |
| m Number: MDE 330, Revised: 10/2011 (copy distribution: original to owner: vellow to MDE: pink to tenant: soldenrod to inspection contractor)   |   |                 |  |                    |            |              |                                 |