| 0367100 04 090918101084  |  |  | 224 North Green Street LLC  |   |  |  |
|--|--|--|---|---|--|--|
| DE TRACKING NO.  | MDE PROPERTY NO. (Include cour   | nty code prefix.)  | OWNE  | RNAME   |  |  |
| Aigburth Road  | 2:1  | Towson   | 21286   | Baltimore   | 1939   |  |
| eet Address  | Unit No.   | City   | Zip Code  | County  | Property Construction D  |  |
| cessing fee for each certificate. The tificates and all required attachmen the results for Full and Modified nalties will be pursued by MDE for tractors must mail inspection certification. | The state of the s | re, MD 21203. The certificate si<br>10 days following Lead Free and<br>f all inspection records shall be received by MDE. Indicate "0000<br>ation for inspection certificates to<br>SPECTION CATEGORIE | ial be signed by in<br>it Lead Safe Inspect<br>maintained for at lea<br>"if Property Constr<br>property Construction P.O. Box 943, Je | ions and within 10 d<br>st 5 years by lead in<br>ruction Date is unkn | days following the receipt framework in the spection contractors. Maxim own. Lead paint inspection |  |
| X 1. Lead Free   | 2. Full Risk Reduction   | 3. Modified Risk I   | Keduction   |   | Methods  |  |
| Methods  | Methods  | B. Visual Inspection an  | d Dust  | A. Dust Inspec  |  |  |
| A. One Time Only (Interior & Exterior)   | A. Dust Inspection   | Inspection   | ■ Date of visite and a  |   | OR   |  |
| OR   | OR   | OR   | and the second of   | and the second  | ction and Visual Inspection OR   |  |
| ☑B. Limited (Interior Lead Free Only)  | D. Dust Inspection with Exterior Waiver  | Inspection with Exter  | Dust<br>ior Waiver  |   | ction with Lead Free Exterior OR   |  |
| Passing Re-inspection required no later than: 07 /20 /2022   | Passing Re-inspection (Form D and Supervisor Statement of Work) required no later than 04/30/unless otherwise noted in local code.   | Passing Re-inspection (Form Statement of Work) required 1 04/30 / unless otherwise recode.   | no later than   | with Lead Verification that   | ction <u>and</u> Visual Inspection<br>Free Exterior<br><b>AND</b><br>windows are lead free or hav  |  |
| 1 Number of Pre-1950 Lead Free Units Number of Post-1949 Lead Free Units   | OR  E. Dust Inspection with  Lead Free Exterior  | OR  D. Visual Inspection an  Inspection with Lear  | d Free Exterior   | been treated so fi  | riction surfaces are lead free.  |  |
| PASSED Based on the findi  | ngs of the attached inspection report(s  | ), I certify that the property/unit  | meets the certifica   | tion criteria at this ti  | me. (circle property or unit)  |  |
|  | ngs of the attached inspection report(s) isted property unit on 07 20 202  | the property/unit fails to meet  | certification criteri   | a at this time. (circle   | e property or unit)  |  |
| refrity that I inspected the above I   |  |  |   |   |  |  |

| Algburth Road reet Address  The Maryland accredited lead inspector marked. The following attachments are regred copy of Supervisor's Statement of pocessing fee for each certificate. To be partificates and all required attachments in miple results for Full and Modified Risk nalties will be pursued by MDE for any | Work, laboratory results, and diagrapaid to: P.O. Box 1417, Baltimore, must be submitted to MDE within 10. Reduction Inspections. Copies of a falsified documentation that is recognized.   | Towson 21286  City Zip Code  2, 3, or 5 and mark the appropriate inspection m tifficate: Form C, laboratory results, and diagrams ams collected for Modified Risk Reduction. For MD 21203. The certificate shall be signed by to deute following Lord Forest Lord  | R NAME  Balto. County 1939  County Property Construction Date the County ONE category and method are to be  |
|--|---|--|---|
| Algburth Road reet Address  The Maryland accredited lead inspector marked. The following attachments are regred copy of Supervisor's Statement of occasing fee for each certificate. To be intificates and all required attachments in miple results for Full and Modified Risk nalties will be pursued by MDE for any   | Unit No.  The property of the | Towson 21286  City Zip Code  2, 3, or 5 and mark the appropriate inspection m tifficate: Form C, laboratory results, and diagrams ams collected for Modified Risk Reduction. For MD 21203. The certificate shall be signed by to deute following Lord Forest Lord  | R NAME  Balto. County 1939  County Property Construction Da ethod. Only ONE category and method are to be   |
| reet Address  e Maryland accredited lead inspector marked. The following attachments are remed copy of Supervisor's Statement of special processing fee for each certificate. To be attachments and all required attachments manually in the results for Full and Modified Risk halties will be pursued by MDE for any   | Unit No.  The property of the | Towson 21286  City Zip Code  2, 3, or 5 and mark the appropriate inspection m tifficate: Form C, laboratory results, and diagrams ams collected for Modified Risk Reduction. For MD 21203. The certificate shall be signed by to deute following Lord Fore and Lord Ref. 1   | Balto. County 1939 County Property Construction Date the dot Only ONE category and method are to be   |
| e Maryland accredited lead inspector marked. The following attachments are remed copy of Supervisor's Statement of occasing fee for each certificate. To be trificates and all required attachments number results for Full and Modified Risk nalties will be pursued by MDE for any                                     | nust mark an inspection category 1, equired to be submitted with the cert Work, laboratory results, and diagrapaid to: P.O. Box 1417, Baltimore, nust be submitted to MDE within 10. Reduction Inspections. Copies of a falsified documentation that is recognitive.  | City Zip Code  2, 3, or 5 and mark the appropriate inspection m ifficate: Form C, laboratory results, and diagrams ams collected for Modified Risk Reduction. For MD 21203. The certificate shall be signed by to  | County Property Construction Da ethod. Only ONE category and method are to be   |
| med copy of Supervisor's Statement of occasing fee for each certificate. To be a trificates and all required attachments number results for Full and Modified Risk nalties will be pursued by MDE for any  | Work, laboratory results, and diagrapaid to: P.O. Box 1417, Baltimore, must be submitted to MDE within 10. Reduction Inspections. Copies of a falsified documentation that is recognized.   | ams collected for Modified Risk Reduction. For MD 21203. The certificate shall be signed by to days following Lord Fore and Lord Signed by the control of th | ethod. Only ONE category and method are to be   |
|  | wes and the supporting documentati  |  | the inspector who performed the inspection. Inspections and within 10 days following the receipt of cleast 5 years by lead inspection contractors. Maximum  |
| 1. Lead Free 2. Full Risk Reduction  |   | 3. Modified Risk Reduction   | 5. Lead Safe  |
| Methods  | Methods   | Methods  | Methods   |
| A. One Time Only (Interior & Exterior) OR  | A. Dust Inspection OR   | □B. Visual Inspection and Dust Inspection  OR  | A. Dust Inspection OR DB. Dust Inspection and Visual Inspection   |
| (Interior Lead Free Only) Passing Re-inspection required no later than: 08/22/2021 Some Number of Pre-1950 Lead Free Units   | D. Dust Inspection with Exterior Waiver  assing Re-inspection (Form D and upervisor Statement of Work) equired no later than 04/30/_ nless otherwise noted in local code.  OR  E. Dust Inspection with Lead Free Exterior   | □C. Visual Inspection and Dust Inspection 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.  OR □D. Visual Inspection and Dust Inspection with Lead Free Exterior   | OR  C. Dust Inspection with Lead Free Exterior OR  D. Dust Inspection and Visual Inspection with Lead Free Exterior AND  Verification that windows are lead free or have been treated so friction surfaces are lead free. |

| DE TRACKING NO. M.<br>Algburth Road  | DEPROPERTY   | 2:3                                  | y code prefix.) * Towson               | ·  |   |  |   |
|--|--|--------------------------------------|--|--|---|--|---|
| reet Address   |  | Unit No.                             | City                                   |  | 7im Code                                |  | HILL BURE CONTRACT CONTRACTOR AND                             |
| e Maryland accredited lead inspector<br>tried. The following attachments are<br>med copy of Supervisor's Statement<br>occssing fee for each certificate. To<br>tificates and all required attachment | y management an inspect<br>y ganger to be submit   | tion category 1,<br>zed with the cer | 2, 3, or 5 and ma<br>tificate: Form C, | rk the appropriate<br>laboratory results   | inspection meth<br>and diagrams for     | COLUMN ONE G   | stegory and method are to b                                   |
| ned copy of Supervisor's Statement<br>occasing fee for each certificate. To  | work, laboratory r   | esults, and diagr                    | ams collected for<br>MD 21203. Th      | Modified Risk R<br>e certificate shall     | eduction. Form I<br>be signed by the    | for Department   | which shall include a \$10 per<br>formed the inspection. Inst |
| nple results for Pull and Modifier is  |  |                                      |  |  |   |  | days following the receipt of participation contractors. Max  |
| nalties will be pursued by MD right<br>ntractors must mail inspection.   |  |                                      | EXECUTE MIDE, L                        | ndicate "0000" if<br>certificates to: P    | Property Constru                        | ction Date is tar  | own. Lead paint inspection                                    |
|  |  |                                      |  | ECORIES.                                   | <b>"</b>                                |  |   |
| 1. Lead Free   | Iz Pros  |                                      |  |  |   | 5-7/20   | S10 : :   |
|  |  |                                      |  |  |   |  |   |
| Methods W  | Meho   |                                      |  | Methodsess                                 |   | TO THE PARTY OF TH | Decitods .  |
| A. One Time Only (Interior & Exterior)   |  |                                      |  | OD COLUMN                                  |   | E A Property   | DR ·  |
| OR   | CT (CT)  |                                      |  | #31(0): 15 A T                             | <b>医新国内部</b> 中国企业公司之间交流                 | ACCUPATION OF  | cher and Visual Inspection                                    |
| B. Limited (Interior Lead Free Only)   | Dus Inspectio  | Valver 4                             | Vigual                                 | inspection and Dailer with Exterior        | Valve 123                               | C Dust Insp  | chigh with Lead Free Exter                                    |
| Passing Re-inspection required no later than:  |  |                                      |  | pection (Form D'an<br>(ont) required no la | Supervisor                              | Fib Due no   | OR<br>exion and Visual Inspection                             |
|  | Supplies   |                                      | Sittement of V                         | (one) required notes                       | er than<br>m local                      |  | ree Exterior  |
| Number of Pre-1950   |  |                                      |  | OR   |   |  | windows are lead free or h                                    |
| Load Proc Units Number of Post-1949  |  | 4                                    |  | inspection <u>and</u> Di                   |   |  | friction surfaces are lead fre                                |
| Lead Prec Units  |  | 44                                   |  | tion with Lead Fr                          |   |  |   |
| PASSED Based on the finding  |  |                                      |  |  | C. 100                                  |  | ime. (circle property or uni                                  |
| PAILED Based on the finding  | SEES CONTRACTOR OF THE SEES OF |                                      |  |  | 100000000000000000000000000000000000000 |  | e property or unit)<br>Article, Annotated Code of h           |
| certify that I inspected the above list  | ed property andon's  |                                      | ig danser lill                         | The second second                          |   |  |   |
| Susan D. Kleinhamer  |  | 4321                                 | Million (2000)                         |  | Services,                               | Inc. 437   | 9 03/02/2020<br>on No. Accreditation Box.                     |

| LEAD PAINT RISK REI   | MARYLAND DEP<br>DUCTION (MDE FORM 3  | ARTMENT OF<br>30) INSPECTION  | THE ENVIRON  | NMENT<br>NO   | 915130   |  |
|---|--|---|--|---|--|--|
| 0367100   | 04 090918101084  |   | 224 North Gr   | eene Street,  | LLC  |  |
|   | MDE PROPERTY NO. (Include co   | unty code prefix.)  | OWNE   | ER NAME   |  |  |
| 2 Aigburth Road   | 701 U. 1.000   |   | Towson 21286   |   | 1934   |  |
| Street Address  | Unit No.   |   | Zip Code   | County  | Property Construction Date   |  |
| marked. The following attachments signed copy of Supervisor's Statem processing fee for each certificate. It certificates and all required attachments ample results for Full and Modified penalties will be pursued by MDE for the supervisor of the | ctor must mark an inspection category are required to be submitted with the ent of Work, laboratory results, and do be paid to: P.O. Box 1417, Baltiments must be submitted to MDE with a Risk Reduction Inspections. Copies or any falsified documentation that is rtificates and the supporting document.  | certificate: Form C, labor<br>iagrams collected for Mo<br>ore, MD 21203. The cer<br>n 10 days following Lead<br>of all inspection records<br>received by MDE. Indice  | ratory results, and diagrams diffied Risk Reduction. For tificate shall be signed by t Free and Lead Safe Inspec shall be maintained for at le tte "0000" if Property Cons ficates to: P.O. Box 943, J | is for Full Risk Redu-<br>im E for Lead Free, whe inspector who pe-<br>ctions and within 10<br>east 5 years by lead in<br>struction Date is unk | ction, and Forms B and C, original which shall include a \$10 per unit rformed the inspection. Inspection days following the receipt of dust inspection contractors. Maximum |  |
| X 1. Lead Free  | 2. Full Risk Reduction   | Participation of the Control of the | d Risk Reduction   | 5. Lead Safe  |  |  |
| Methods   | Methods  | N.  | Methods  |   | Methods  |  |
| □A. One Time Only (Interior & Exterior) OR  □B. Limited (Interior Lead Free Only) Passing Re-inspection   | □ A. Dust Inspection  OR  □ D. Dust Inspection  with Exterior Waiver   |   | OR<br>ection <u>and</u> Dust<br>with Exterior Waiver   | 1 100   | oction OR ection and Visual Inspection OR ection with Lead Free Exterior OR  |  |
| required no later than:  10/31/2022  1 Number of Pre-1950 Lead Free Units Number of Post-1949 Lead Free Units   | Passing Re-inspection (Form D and Supervisor Statement of Work) required no later than 04/30/_unless otherwise noted in local code.  OR  Description with Lead Free Exterior   | Statement of Work) 04/30/unless o code.  D. Visual Inspe  | on (Form D and Supervisor required no later than therwise noted in local  OR  ection and Dust with Lead Free Exterior  | with Lead<br>Verification tha   | ection and Visual Inspection I Free Exterior AND t windows are lead free or have friction surfaces are lead free.  |  |
| FAILED Based on the finding   | ngs of the attached inspection report(size of the attache | s), the property/unit fail  | s to meet certification crite  | ria at this time. (circ   | le property or unit)   |  |
| Susan D. Kleinhammer  | 4321   | 03/02/2022 I  | eadtec Services,   |   | 9 03/02/2022   |  |

Form Number: MDE 330, Revised: 04/2017 (copy distribution: original to owner; yellow to MDE; pink to tenant; goldenrod to inspection contractor)

| EAD DAINT DICK DE   | MARYLAND DI<br>DUCTION (MDE FORM   | EPARTMENT OF   | THE ENVIRO   | NMENT   | 906046   |
|---|--|--|--|---|--|
|   | and the same of th | 1330) INSPECTIO  | Account to the second  | Greene Street L   | 1.0  |
| 0367100<br>MDE TRACKING NO.   | 04 090918101084<br>MDE PROPERTY NO. (Includ  | e county code prefix )   | 5486 (19) (1) (2) (2) (3) (4) (8) (6)  | ER NAME   | all C  |
| 2 Aighurth Road   | 2:5  | Towson   | 21286  | Baltimore   | 1939   |
| Street Address  | Unit   |  | Zip Code   | County  | Property Construction Date   |
| narked. The following attachment<br>igned copy of Supervisor's Stater<br>rocessing fee for each certificate.<br>ertificates and all required attach<br>ample results for Full and Modifienalties will be pursued by MDE<br>ontractors must mail inspection of | pector must mark an inspection cate is are required to be submitted with ment of Work, laboratory results, ar To be paid to: P.O. Box 1417, Ba ments must be submitted to MDE ved Risk Reduction Inspections. Co for any falsified documentation the certificates and the supporting documentation.  2. Full Risk Reduction are required to the supporting documentation the certificates and the supporting documentation.  | the certificate: Form C, labora and diagrams collected for Modiltimore, MD 21203. The certivithin 10 days following Lead I pies of all inspection records shat is received by MDE. Indicate mentation for inspection certifi | tory results, and diagram<br>fied Risk Reduction. For<br>ficate shall be signed by<br>Free and Lead Safe Insp<br>hall be maintained for at<br>6 "0000" if Property Con-<br>cates to: P.O. Box 943,   | ms for Full Risk Redu<br>orm E for Lead Free, we<br>the inspector who pe<br>ections and within 10<br>least 5 years by lead<br>instruction Date is unk | ction, and Forms B and C, origin which shall include a \$10 per unitrormed the inspection. Inspection days following the receipt of dinspection contractors. Maximumown. Lead paint inspection |
| <u> X                                    </u>   |  |  | agrafia de la companya de la company |   |  |
| Methods   | Methods  | Me   | ethods   |   | Methods  |
|   | OR  D. Dust Inspection with Exterior Waiver  Passing Re-inspection (Form D a Supervisor Statement of Work) required no later than 04/30/ unless otherwise noted in local or OR  E. Dust Inspection with Lead Free Exterior  dings of the attached inspection rep   | Passing Re-inspection Statement of Work) re 04/30 /_ unless oth code.  D. Visual Inspection wort(s), I certify that the proper   | tion and Dust th Exterior Waiver  (Form D and Supervisor equired no later than erwise noted in local  OR tion and Dust ith Lead Free Exterior  (Vunit meets the certif   | D. Dust Insp with Lea Verification the been treated so  | OR vection and Visual Inspection OR vection with Lead Free Exterior OR vection and Visual Inspection d Free Exterior AND at windows are lead free or have friction surfaces are lead free.     |
|   | listed property/unit on 07 /20   |  |  |   |  |

| 0367100  | EDUCTION (MDE FO   |   |  | 224 North Gre  |   | LLC   |
|--|--|---|--|--|---|---|
| MDE TRACKING NO.   | MDE PROPERTY NO.   | Include county code   | prefix.)   | OWNER  |   |   |
| 2 Aigburth Road  |  |   | imore  | 21286  | alto. County  | 1939  |
| treet Address  |  | Unit No. C  | ity  | Zip Code   | County  | Property Construction Date  |
| narked. The following attachmigned copy of Supervisor's Sta<br>rocessing fee for each certifica<br>ertificates and all required atta<br>ample results for Full and Moderalties will be pursued by MI | aspector must mark an inspectivents are required to be submitted tement of Work, laboratory restet. To be read to: P.C. Box 14 chruents must be submitted to lifted Risk Reduction Inspection for any falsified documental a certificates and the supporting 2. Full Risk F. | d with the certificat<br>ults, and diagrams of<br>17, Beltimore, MD<br>MDE within 10 days<br>as. Copies of all as<br>ion that is received<br>g documentation for<br>INSPECT | e: Form C, laboratory re-<br>collected for Modified R<br>21203. The certificate is<br>following Lead Free ar-<br>pection records shall be<br>b, MDE. Indicate "000"  | sults, and diagrams for isk Reduction. Form E shall be signed by the ad Lead Safe Inspection maintained for at least 0" if Property Constru. oo: P.O. Ber. 943, Jess ES  | r Full Rist Reduct<br>for Lead Free, when spector who performs and within 10 do<br>5 years by lead in<br>ction Date is unknown. | ion, and Forms B and C, originated shall include a \$10 per uniformed the inspection. Inspection ays following the receipt of duspection contractors. Maximum wn. Lead paint inspection |
| Methods  A. One Time Only  | Methods.   |   | Methods  B. Visual Inspection as   | NOTES TO STATE OF THE PERSON NAMED IN COLUMN N | A.Dust-Inspec   | .Methods  |
| (Interior & Exterior) OR  IB. Limited (Interior Lead Free One Passing Re-inspection required no later than: 07/17/2021  1 Number of Pre-1950 Lead Free Units Number of Post-1949 Lead Free Units     | Passing Re-inspection (F. Supervisor Statement or required no later than 44 unless otherwise noted in OR   | iver  Im D and Pa Work) St // 30 / Q local code, c  | Inspection OR  C Visual Inspection and Inspection with Extension Service Street | prior Waiver  D and Supervisor no later than noted in local  | C. Dust Inspe   | tion and Visual Inspection OR OR ON   |
| FAILED Based on the  | findings of the attached inspect<br>findings of the attached inspect<br>ove listed property/unit on 0  | on report(s), the pr<br>7/ 17 /2019 <sub>at</sub> 10  | operty/unit fails to mee   | t certification criteria   | at this time. (circle   | property or unit)   |