

MARYLAND DEPARTMENT OF THE ENVIRONMENT

811750

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

0360915 03:2506 7132 023 ELMORA VENTURE LLC
 MDE TRACKING NO. MDE PROPERTY NO. (Include county code prefix.) OWNER NAME
4212 AUDREY AVE 4212:2 BALTIMORE 21225 Baltimore City 1943
 Street Address Unit No. 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 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"/> 1. Lead Free	<input checked="" type="checkbox"/> 2. Full Risk Reduction	<input type="checkbox"/> 3. Modified Risk Reduction	<input type="checkbox"/> 5. Lead Safe
<p>Methods</p> <input type="checkbox"/> A. One Time Only (Interior & Exterior) OR <input type="checkbox"/> B. Limited (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>Methods</p> <input checked="" type="checkbox"/> A. Dust Inspection OR <input type="checkbox"/> D. 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 <input type="checkbox"/> E. Dust Inspection with Lead Free Exterior	<p>Methods</p> <input type="checkbox"/> B. Visual Inspection <u>and</u> Dust Inspection OR <input type="checkbox"/> C. Visual Inspection <u>and</u> 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 <input type="checkbox"/> D. Visual Inspection <u>and</u> Dust Inspection with Lead Free Exterior	<p>Methods</p> <input type="checkbox"/> A. Dust Inspection OR <input type="checkbox"/> B. Dust Inspection <u>and</u> Visual Inspection OR <input type="checkbox"/> C. Dust Inspection with Lead Free Exterior OR <input type="checkbox"/> D. Dust Inspection <u>and</u> Visual Inspection with Lead Free Exterior AND 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 meets the certification criteria at this time. (circle property or unit)
 FAILED Based on the findings of the attached inspection report(s), the property fails to meet certification criteria at this time. (circle property or unit)
 I certify that I inspected the above listed property on 10/11/18 at 11:53 a.m./p.m. under Title 6, Subtitle 8 of the Environment Article, Annotated Code of MD.

Nabeed Gul [Signature] 16848 02/26/2020 OHAD LLC 16849 02/26/2020
 Inspector's Name Inspector's Signature Accreditation No. Accreditation Exp. Date Inspection Contractor Name Accreditation No. Accreditation Exp. Date

MARYLAND DEPARTMENT OF THE ENVIRONMENT

811749

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

0360915 MDE TRACKING NO. 03:25067132 023 MDE PROPERTY NO. (Include county code prefix.) ELMORA VENTURE LLC OWNER NAME
4212 AUDREY AVE Street Address 4212:1 Unit No. BALTIMORE City 21225 Zip Code Baltimore city County 1943 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"/> 1. Lead Free	<input checked="" type="checkbox"/> 2. Full Risk Reduction	<input type="checkbox"/> 3. Modified Risk Reduction	<input type="checkbox"/> 5. Lead Safe
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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 10/11/18 at 11:30 a.m. p.m. under Title 6, Subtitle 8 of the Environment Article, Annotated Code of MD.

Nahed Gul Inspector's Name [Signature] Inspector's Signature 16848 Accreditation No. 02/26/2020 Accreditation Exp. Date OHAD LLC Inspection Contractor Name 16849 Accreditation No. 02/26/2020 Accreditation Exp. Date