

MARYLAND DEPARTMENT OF THE ENVIRONMENT 796819
LEAD PAINT RISK REDUCTION (MDE FORM 330) INSPECTION CERTIFICATE NO.

0346789 17-06-0456567 Capital Investment & Management LLC
MDE TRACKING NO. MDE PROPERTY NO. (Include county code prefix.) OWNER NAME
3811 St. Barnabas Rd 102 Suitland 20747 Prince Georges 1965
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 147, 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 30 days following Lead Free inspections and within 10 days following the receipt of dust sample results for Full and Modified Risk Reduction inspections. All inspection results shall be valid for a period of 5 years by lead inspection contractors. Maximum penalties will be pursued by MDE for any falsification of information. If the Date is unknown. Lead paint inspection contractors must mail inspection certificates and attachments to MDE, P.O. Box 147, Baltimore, MD 20794.

<input checked="" type="checkbox"/> 1. Lead Free Methods <input checked="" type="checkbox"/> A. One Time Only <i>(Interior & Exterior)</i> OR <input type="checkbox"/> B. Limited <i>(Interior Lead Free Only)</i> Passing Re-inspection required no later than: _____ ____ Number of Pre-1950 Lead Free Units ____ Number of Post-1949 Lead Free Units	<input type="checkbox"/> 2. Full Risk Reduction Methods <input type="checkbox"/> A. Dust Inspection OR <input type="checkbox"/> D. Dust Inspection with Exterior Swab Passing Re-inspection (Form C 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	<input type="checkbox"/> 3. Modified Risk Reduction Methods <input type="checkbox"/> B. Visual Inspection and Dust Inspection OR <input type="checkbox"/> C. Visual Inspection and Dust Inspection with Exterior Swab Passing Re-inspection (Form C and Supervisor Statement of Work) required no later than 04/30/____ unless otherwise noted in local code. OR <input type="checkbox"/> D. Visual Inspection and Dust Inspection with Lead Free Exterior	<input type="checkbox"/> 5. Lead Safe Methods <input type="checkbox"/> A. Dust Inspection OR <input checked="" type="checkbox"/> B. Dust Inspection and Visual Inspection OR <input type="checkbox"/> C. Dust Inspection with Lead Free Exterior OR <input checked="" type="checkbox"/> 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.
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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 02/24/17 at 8:00 a.m./p.m. under Title 6, Subtitle 8 of the Environment Article, Annotated Code of MD.

Terry West [Signature] 15659 3/4/2018 AAA management & Associates, Inc. 14830 1/7/2019
Inspector's Name Inspector's Signature Accreditation No. Accreditation Exp. Date Inspection Contractor Name Accreditation No. Accreditation Exp. Date