

Toledo-Lucas County Health Department
Local Lead Inspection
Property Registration
 As required by the Toledo Ordinance

Property Information

Building Owner Name			Year Property Built <i>(for registration, property must be built before 1978)</i>	
Building Address	Unit or Apt #	City	State	Zip Code
Are there other Units/Apartments at above mentioned building address?		<input type="checkbox"/> Yes → If yes, please indicate number of total <u>rental units</u> at building address: <input type="checkbox"/> No	<input type="checkbox"/> One (1) <input type="checkbox"/> Two (2)	<input type="checkbox"/> Three (3) <input type="checkbox"/> Four (4)
Contact Person/Manager/Principal (if other than owner)			Best Contact Phone Number () -	
Name of Local Lead Inspector who performed testing or Risk Assessor who Certified Abatement				

Local Lead Inspection Information

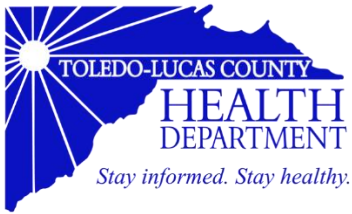
For owners applying for 3-year and 6-year Lead Safe Certificates

Date of Initial Local Lead Inspection / /	<input type="checkbox"/> Passed (eligible for 6-year Lead Safe Certificate) <input type="checkbox"/> Failed
Date of Local Lead Re-Inspection <i>(if applicable)</i> / /	<input type="checkbox"/> Passed (eligible for 3-year Lead Safe Certificate) <input type="checkbox"/> Failed
Date of Local Lead Re-Inspection <i>(if applicable)</i> / /	<input type="checkbox"/> Passed (eligible for 3-year Lead Safe Certificate) <input type="checkbox"/> Failed
Date of Local Lead Re-Inspection <i>(if applicable)</i> / /	<input type="checkbox"/> Passed (eligible for 3-year Lead Safe Certificate) <input type="checkbox"/> Failed
Date of Local Lead Re-Inspection <i>(if applicable)</i> / /	<input type="checkbox"/> Passed (eligible for 3-year Lead Safe Certificate) <input type="checkbox"/> Failed
Note: Property <u>must</u> pass local lead inspection to register as a Lead Safe Property	

Certificate Information

Type of Certificate Application is for <i>(Check Appropriate Box)</i>	
<input type="checkbox"/> 1-year Lead Safe Certificate <i>(Proof of Federal Assistance must be attached)</i>	<input type="checkbox"/> 3-year Lead Safe Certificate
<input type="checkbox"/> 6-year Lead Safe Certificate	<input type="checkbox"/> 20-year Lead Safe Certificate <i>(Proof of abatement must be attached)</i>

<p>This form is accompanied by the following required information:</p> <input type="checkbox"/> Completed Local Lead Inspection (performed by Local Lead Inspector) OR <input type="checkbox"/> Proof of Abatement Work on Property AND <input type="checkbox"/> Registration Fee (\$45 per unit)
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Property Owner Information *(necessary to mail Lead-Safe Certificate)*

Property Owner Name				
Owner Address	Unit or Apt #	City	State	Zip Code

Property Owner Signature

Signature	Date / /
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For Internal Use by Toledo-Lucas County Health Department

<input type="checkbox"/> Property Owner Contacted
<input type="checkbox"/> Data Entered
<input type="checkbox"/> Lead-Safe Certificate Mailed (Date: / /)
Additional Notes: _____

