MARYLAND DEPARTMENT OF THE ENVIRONMENT

LEAD PAINT RISK REDUCTION (MDE FORM 330) INSPECTION CERTIFICATE NO. 797405

0348568	03 12 08 3810 028	2116 Saint Paul LLC
MDE TRACKING NO.	MDE PROPERTY NO. (Include county code prefix.)	OWNER NAME

2116 St Paul St.	All	Baltimore	21218	Balt city	1883
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

☑ 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**
☐ **B.** Limited *(Interior Lead Free Only)* Passing Re-inspection required no later than: ___/___/___	☐ **D.** Dust Inspection with Exterior Waiver	☐ **C.** Visual Inspection **and** Dust Inspection with Exterior Waiver	☐ **B.** Dust Inspection **and** Visual Inspection **OR**
___ Number of Pre-1950 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.	Passing Re-inspection (Form D and Supervisor Statement of Work) required no later than 04/ 30 /___ unless otherwise noted in local code.	☐ **C.** Dust Inspection with Lead Free Exterior **OR**
___ Number of Post-1949 Lead Free Units	**OR**	**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.
	☐ **E.** Dust Inspection with Lead Free Exterior	☐ **D.** Visual Inspection **and** Dust Inspection with Lead Free 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)*

☐ **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 2/23/2017 at 11:00 **a.m./p.m.** under Title 6, Subtitle 8 of the Environment Article, Annotated Code of MD.

Zvi Pollak	Z. Pollak	13816	11-29-2018	Quality Inspections	9830	11-29-2018
Inspector's Name	Inspector's Signature	Accreditation No.	Accreditation Exp. Date	Inspection Contractor Name	Accreditation No.	Accreditation Exp. Date