

PROPERTY INVESTIGATION CLOSURE REPORT
Environmental Investigation Of Children with Elevated Blood Lead Levels

Elevated Blood Lead Level = 1 venous blood lead level (BLL) ≥ 20 mcg/dL, or 2 venous BLLs ≥ 15 mcg/dL drawn at least 90 days apart.

Completion of this form is mandatory for agencies contracting with the Division of Public Health for program funding. Personal identifiable information collected on this form is used to describe the causes and conditions of lead poisoning and to monitor services provided. Data will be used in the aggregate to assist research and project future service needs.

CHILD INFORMATION

Name of Child - Last	First	MI	Date of birth (mm/dd/yy)
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PROPERTY INFORMATION

Street Address	Apt. No.	City	County	Zip Code
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1) Name of Certified Risk Assessor/Hazard Investigator who conducted clearance:

2) Completion dates of lead hazard reduction work (mm/dd/yy):

- | | |
|---|---|
| <input type="checkbox"/> Interior interim controls:
<input type="checkbox"/> Interior abatement: | <input type="checkbox"/> Exterior interim controls:
<input type="checkbox"/> Exterior abatement: |
|---|---|

3) Date Investigation Closed: (mm/dd/yy) Enter the date the final clearance report was sent to the contractor.

4) Reason investigation closed: Check all that apply. Should match the clearance protocol used.

- Property passed final visual clearance inspection *and* all dust wipe samples met clearance standards.
- Only* exterior lead-based paint hazard reduction work was conducted and property passed final exterior visual clearance inspection.
- Final clearance report has been provided to the contractor, owner, and occupants if the property is a rental.
- Other identified non-paint lead hazards were removed. Describe:

5) If lead hazard reduction work was not completed, describe what further action was taken:

- Lis pendens was filed on property. Date filed: _____ (mm/dd/yy) Copy is attached to the address in HHLPSS.
- Building was razed. Date razed: _____ (mm/dd/yy)
- Other action taken as described:

6) **Comments:** (Explain any special circumstances pertaining to the investigation closure)

Attach this completed form, along with any completed clearance report, to the property address record in HHLPSS. (See Job Aid 4.3, Adding Attachments, at www.dhs.wisconsin.gov/publications/p02299-4.3.pdf) Contact the Wisconsin Childhood Lead Poisoning Prevention Program environmental health specialist at 608-266-9382 or dhsleadpoisoningprevention@wi.gov when all documents have been uploaded to the address record.