

PROPERTY INVESTIGATION 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
Owner name			Telephone	
Owner street address	City	County	State	Zip code

1) Year of construction: _____

2) Address is: (Check one)

Residence when EBLL identified Current residence Supplemental address Other (describe):

3) Type of residence (check one): Section 8 housing Owner occupied Private rental Public housing

4) Family received federally mandated *Protect Your Family From Lead in Your Home* pamphlet from landlord at the time of the lease or from previous owner prior to purchase of home: Yes No

PROPERTY INVESTIGATION INFORMATION

5) Date investigation opened: (mm/dd/yy)	Date of investigation: (mm/dd/yy)	Name of certified risk assessor/hazard investigator:
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6) Main cause(s) of lead-based paint hazard(s) or exposure: (Check all that apply)

Deterioration Mouthing/chewing surfaces
 Renovation Eating non-food items
 Scraping or sanding prior to repainting No hazards present - property investigation closed
 Repair work Other: _____

7) Lead hazards identified: (Check all that apply)

Interior	Exterior
<input type="checkbox"/> Windows	<input type="checkbox"/> Windows
<input type="checkbox"/> Doors	<input type="checkbox"/> Siding
<input type="checkbox"/> Trim	<input type="checkbox"/> Ceilings
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Ceilings
	<input type="checkbox"/> Soil
	<input type="checkbox"/> Porches
	<input type="checkbox"/> Other: _____

8) Method(s) used to collect environmental samples:

Interior	Exterior
<input type="checkbox"/> XRF <input type="checkbox"/> Paint chip	<input type="checkbox"/> XRF <input type="checkbox"/> Paint chip
<input type="checkbox"/> Dust wipe	<input type="checkbox"/> Dust wipe <input type="checkbox"/> Soil

9) Due dates for lead hazard reduction completion: (mm/dd/yy)

Interior	Exterior
Interim controls _____	Interim controls _____
Abatement _____	Abatement _____

10) Is the exposure related to take home lead dust from a household member's work or activities outside the home? Yes No

11) Other lead hazards or sources identified based on testing: (Check all that apply)

Mini-blinds Hobby Folk remedies Pottery Water Other, Describe:

12) Local health department has notified the owner and posted a notice that the property is untenable, unsafe, dilapidated or unsanitary, or has lead hazards present, and therefore, a human health hazard. Yes No

13) Date risk assessment report was sent to: Owner: _____ (mm/dd/yy) Tenant: _____ (mm/dd/yy)

Attach this completed form, along with the final risk assessment report and any written orders, to the property address record in the HHLPS database. (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.

Instructions for Completing the Property Investigation Report, F-44771C

Complete the entire sections Child Information and Property Information.

- 1) Enter the year of construction of the original main dwelling. Use tax assessor or land records if the property owner does not know the year of construction. Do not estimate. If no record exists indicate No Record.
- 2) Mark the box that applies to the property being investigated.
 - *Residence when EBLI identified*: Select if the address was used when the child's case was initially opened but the child no longer lived at the property at the time of the investigation.
 - *Current residence*: Select if the child is living at the address at the time of the investigation, or if it is determined to be the residence the child spends the majority of time at.
 - *Supplemental address*: Any address the child lives at part time other than their current or primary address.
 - *Other*: Any address the child spends enough time at to be considered a possible source of exposure: daycare, babysitter, grandparents, other family relatives or friends. Explain if "Other" is marked.
- 3) Type of residence: Mark the box that applies to the property being investigated.
 - *Section 8*: A private rental unit that has the rent subsidized by a Housing Choice Voucher or Project Based Housing Voucher. The family is not responsible to pay the full monthly rent amount.
 - *Owner Occupied*: If the family has title to the property listed in their name or if the family has a recorded land contract.
 - *Private Rental*: If the family is responsible to pay the full monthly rent amount to the owner of the property or a representative of the owner.
 - *Public Housing*: The property is owned by a local public housing authority.
- 4) Indicate if the family did or did not receive the *Protect Your Family From Lead in Your Home* pamphlet.
- 5) Enter the date the investigation was opened in HHLPS. See the investigation summary tab in the Environmental section in HHLPS. Enter the date the onsite investigation was completed. Enter the name of the certified person who conducted the investigation or the main or primary contact if more than one person was involved in the investigation.
- 6) Select all causes that apply, based on the findings of your environmental investigation and risk assessment, to identify all the lead hazards and possible sources of exposure. If "Other" is marked, provide an explanation.
- 7) Select all the components identified in the risk assessment report to have lead hazards on the interior and exterior of the property. Explain the component or surface if "Other" is marked.
- 8) Select all the type(s) of testing used on the interior and exterior of the property.
- 9) Enter the completion due dates for interim controls and abatement as provided in the Order to Correct Lead Hazards issued to the property owner.
- 10) Indicate if the exposure is related to take home lead dust from a household member's work or other activities outside of the home. Examples: construction, manufacturing where lead is used, or spending time in areas with high lead dust such as an indoor shooting range or recycling/salvage center.
- 11) Select all non-paint lead sources identified. If "Other" is marked, describe the source.
- 12) Mark if a placard was placed on the property and it is ordered to remain vacant until all lead hazards have been corrected and the property has passed a lead clearance examination.
- 13) Enter the date the risk assessment report was sent or delivered to the owner, and tenant if the property is a rental. DHS 163.14(9) (k) requires the risk assessment report to be provided to the property owner within ten working days from the date laboratory results are received.