**\*\*\*Please consult with your legal counsel before issuing order\*\*\***

[Use your letterhead]

XYZ HEALTH DEPARTMENT

STREET ADDRESS

CITY, WI ZIP CODE

[Date]

[Property owner name]

[Street Address]

[City, State, Zip Code]

**Re: Lead Hazard Order – [Address, City], Wisconsin (**the property for which orders are issued)

Dear Property Owner,

**You are ordered to remove the identified lead hazards at [Address, City], Wisconsin within 30 days following receipt of this order.**

On [date], [name of person], a certified [**select one:** risk assessor / hazard investigator] for the [name of local] Health Department, conducted an investigation for lead hazards at the above property. A copy of the lead-based paint risk assessment report is enclosed. This investigation was conducted under the authority of Wis. Stat. § 254.166 to identify deteriorated lead-based paint, lead dust hazards, and lead hazards in bare soil. [**Select appropriate option:** Paint chip, dust wipe and soil samples were collected from the property and tested for lead by the Wisconsin Occupational Health Laboratory**, OR,** Dust wipe and soil samples were collected from the property and tested for lead by the Wisconsin Occupational Health Laboratory. Paint was analyzed on site with a calibrated x-ray fluorescence instrument.].The test results are included in the enclosed risk assessment report for your review. [**Select each type of lead hazard identified**: Lead-based paint / dust / soil] hazards were confirmed by the test results.

[**Optional language, if applicable:** Because of these conditions, the property is untenantable. Therefore the tenant has certain rights under state law, Wis. Stat. § 704.07.]

According to [local county, municipality or government office name]’s records, you are the owner of the dwelling at [Address] in [City], Wisconsin, and must comply with this lead hazard order. [**Edit to match findings from risk assessment:** Lead paint hazards / lead dust hazards / soil lead hazards] were found and must be corrected in accordance with the detailed guidance in the enclosed Scope of Work and in Section 8.0 of the enclosed risk assessment report.

You must use a certified lead **[select one:** abatement / renovation**]** contractor to do this work. (Note: abatement work always requires abatement certification.) For a list of certified contractors, go to <https://dhsgis.wi.gov/dhs/clara/index.html>. To learn about becoming a certified contractor, go to <https://www.dhs.wi.gov/lead/training-certification.htm> or call 608-261-6876.

**Prior to beginning work,** you must contact the [name of local] Health Department to provide the actual work dates so that the [name of local] Health Department can schedule a follow-up clearance evaluation to ensure that all ordered work has been properly completed and the dwelling is safe for occupancy.

**This work must be completed within 30 days.** [**Edit to match your local jurisdiction:** Failure to correct these conditions within 30 days will result in a referral to the District Attorney for civil or criminal penalties up to $5,000 per day, per violation, and up to two years’ probation. An extension of the lead order may be granted if a signed contract with a (**select as appropriate:** certified lead abatement contractor / certified lead-safe renovator] is provided to the Health Department.

**Financial Assistance.** You may be able to secure financial assistance to help with correcting the lead hazards from a commercial bank or lender. You may also be able to identify other sources of assistance by contacting the Wisconsin Division of Housing at 608-261-6535. For information about availability of funding in your area go to

<https://doa.wi.gov/Pages/LocalGovtsGrants/Community-Development-Block-Grant-Small-Cities-Housing-Program.aspx>.

**Right to appeal.** [Verify with your legal counsel what the appeal rights for orders are in your local jurisdiction and insert here.]

(Delete the paragraph that does not apply)

**[for owner occupied property]**

There may be additional painted or varnished surfaces at this dwelling that contain lead but were not identified in this investigation. Consult the HUD Lead Paint Safety Field Guide for guidance about how to safely maintain your property after you have complied with this order. Call 608-266-5817 or go to <https://www.hud.gov/program_offices/healthy_homes/healthyhomes/lead> to access a copy.

**[for landlords and rental property]**

There may be additional painted or varnished surfaces in this property that contain lead but were not identified in this investigation. In the future rental property owners must hire a certified lead company with a certified lead-safe renovator or become a certified lead company and have a certified lead-safe renovator before doing any work on this or any other rental property built before 1978 that disturbs painted or varnished surfaces. To find a list of certified renovation contractors or to find out how to become a certified contractor, please call 608-261-6876 or visit <http://www.dhs.wi.gov/lead>.

If you have questions about this order, please contact [name], at [phone number].

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Health Officer

Enclosures: Lead-Based Paint Risk Assessment Report

Scope of Work