



## NOTIFICATION OF LEAD ABATEMENT ACTIVITIES

State Form 49150 (R7 / 4-11)

Approved by State Board of Accounts, 2011

INDIANA STATE DEPARTMENT OF HEALTH

### INSTRUCTIONS:

1. This State form, 49150 must be used to notify of lead abatement activities pursuant to 410 IAC 32. If accessing this form on-line at the URL listed above, you may print the blank form and fill it out by hand for submission with original signatures.
2. Submit **one** notification form for **each project** for which you are seeking approval. The cost is \$ 50.00 per notification.
3. **Please type or print in ink.**
4. Return this form, required addenda, and check or money order made payable to "ISDH Lead and Healthy Homes Program" by mail to:  
**Cashier's Office**  
**Indiana State Department of Health**  
**PO Box 7236**  
**Indianapolis, Indiana 46207**
5. Notification is only required when a project's activities are designed to permanently eliminate Lead based paint hazards.
6. Section I: Type of Notification-410 IAC 32-4-6
  - A. If this is the original notice, please check the appropriate space on the notification form.
  - B. If this is a revised notice, please check the appropriate space on the notification form. The revised notice must be postmarked at least 5 working days or delivered at least 2 working days before the start date of lead abatement activity. Facsimiles will be accepted by the ISDH.
  - C. All revisions must include a copy of the notice being revised.
  - D. If this is a cancelled notice, please check the appropriate space on the notification form.
  - E. Courtesy Notification.
7. Section II: Facility Information-410 IAC 32-4-6(1)(D)
  - A. Either the owner or operator must submit the notice.
  - B. The owner means the individuals(s) who own the property or lease the property.
  - C. The operator means the lead abatement contractor.
  - D. Specify the name, address, telephone number, Indiana license number and license expiration date, of the:
    1. lead abatement contractor; and 2. the risk assessor or lead inspector who conducted the inspection prior to abatement
8. Section III: Type of Operation-410 IAC 32-4-6(2)(D)
  - A. Refer to the definitions of encapsulation, enclosure and emergency abatement in 410 IAC 32-1.
  - B. Owner/Operator must also complete Section XIII of notification form.
9. Section IV: Procedures, Including Analytical Methods Used To Detect the Presence and Amounts of Lead Based Paint.-410 IAC 32-4-6(2)(F)
10. Section V: Approx. Amounts of Lead To Be Removed - 410 IAC 32-4-6(2)(G)

Specify the amount of Lead Based paint to be removed in terms of linear feet or square feet on facility components.
11. Section VI: Scheduled Dates of Lead Based Paint Removal - 410 IAC 32-4-6(2)(I)

This means the actual start and end date of lead-based paint hazard remediations in the work area.
12. Section VII: Facility Description - 410 IAC 32-4-6(2)(E) and (H)

Provide enough detail that an unfamiliar inspector can find the abatement without asking anyone.
13. Section VIII: Description of planned activity work to be performed and methods to be employed - 410 IAC 32-4-6(2)(J)

Briefly describe the methods to be used such as encapsulation, enclosure, heat scrapping, etc..., list the affected facility components such as doors, windows, and floors.
14. Section IX: Description of work practice and engineering controls to be used - 410 IAC 32-4-6(2)(K)

Examples of work practices and engineering controls to prevent lead emissions at the site would include: the use of water or wetting agents, containments, and negative air units during removal; daily clean up, placing waste into leak tight containers and secure storage.
15. Section X: Description of procedures to be followed in the event that unexpected lead-based paint becomes a lead based hazard and warrants immediate action. 410 IAC 32-4-6(2)(O)

Procedures could include any steps taken to immediately minimize exposure potential. A notification would need to be given as early as possible, but not later than the following work day.
16. Section XI: Emergency lead abatement- 410 IAC 32-4-6(2)(O)

Specify:

  1. The date that the emergency occurred,
  2. a description of the sudden unexpected event, and
  3. an explanation of how the event causes a lead-based paint hazard and warrants immediate action.
17. Section XII: Certification Statement and Signature by Owner/Operator-410 IAC 32-4-6(2)(M)

Self-explanatory.

### NOTIFICATION OF LEAD ABATEMENT ACTIVITIES

I. Type of Notification (*check one*):  Original  Revised\*  Cancelled  Courtesy

\*Must include copy of notification which is being revised

REMEMBER: EPA Renovator Certification is required for all non-abatement renovation activities in target housing and/or child-occupied facilities [40 CFR 745].

II. General Information (*Identify owner, property address, lead activities contractor, lead inspector, risk assessor*)

Property Owners Name: \_\_\_\_\_

Property Owners Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ ZIP: \_\_\_\_\_ Contact Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Lead Abatement Contractor: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ ZIP: \_\_\_\_\_ Contact Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Indiana Contractor License Number: \_\_\_\_\_ Expiration Date (*month, day, year*): \_\_\_\_\_

FAX number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Check here if you want a copy of the abatement notice letter mailed to you instead of faxed or sent by e-mail.

Lead Inspector or Risk Assessor Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Indiana License Number: \_\_\_\_\_ Expiration Date (*month, day, year*): \_\_\_\_\_

Telephone: \_\_\_\_\_

III. Type of Operations to be used on this site (*check all that apply*):

Interior  Wet Stripping  Encapsulation  Exterior  Dry Stripping  Enclosure  Emergency

IV. Procedures used to detect the Presence and Amount of Lead:

XRF Report  Paint Chip Analysis  Other: \_\_\_\_\_

V. Approximate amount of lead-based paint affected:

VI. Scheduled dates of lead-based paint removal:

Linear Feet:

Start Date (*month, day, year*):

Surface Area (square feet):

Completion Date (*month, day, year*):

VII. Property Description:  Child-occupied Facility  Target Housing  Other: \_\_\_\_\_

Work Site Address: \_\_\_\_\_ City: \_\_\_\_\_, IN Zip code: \_\_\_\_\_

Affected component or portion of facility: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Exact activity location(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number of floors: \_\_\_\_\_ Age of structure: \_\_\_\_\_ Present use: \_\_\_\_\_

VIII. Description of planned activity work to be performed and methods to be used:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IX. Description of work practices and engineering controls to be used to comply with this rule:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

X. Description of procedures to be followed in the event that unexpected lead-based paint becomes a lead hazard and warrants immediate action: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

XI. For Emergencies Only:

Explanation of how the event caused a lead hazard and warranted immediate action: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

XII. I hereby certify that the information in this notification is correct and that I will only use Indiana-licensed workers and project supervisors, to implement this lead abatement activity, which have been trained under 410 IAC 32; 40 CFR 745. The trained individual(s) along with evidence that the required training was accomplished shall be available at the job site during actual work hours.

\_\_\_\_\_  
Owner/operator (signature)

\_\_\_\_\_  
Date (month, day, year)

\_\_\_\_\_  
Owner/operator (printed)

\_\_\_\_\_  
Affiliation