

Michigan Department of Community Health  
Division of Environmental and Occupational Epidemiology  
**Lead Hazard Remediation Program**

**Occupant  
Protection  
Plan**

*All abatement projects must not be started before an occupant protection plan specific to the structure is developed by a Michigan certified Abatement Project Designer or Abatement Supervisor. The plan shall describe measures and management procedures that shall be taken to protect the building occupants. (Michigan Rule No. 325.9917 (4) (a) & (b))*

Company: \_\_\_\_\_ Property Address: \_\_\_\_\_

Work will begin on (abatement start date): \_\_\_\_\_ Work will end on (abatement end date): \_\_\_\_\_

Work will be under the control of: (list certified supervisors) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The residents will be relocated until the work is completed and clearance has been achieved.

**OR**

The residents will be restricted from work areas until clearance is confirmed by using the following methods:

<i>Work Area</i>	<i>Method of restricting access</i>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

The following work practices and engineering controls will be used to minimize contamination in the residence

- Work area containment     Wet methods     Decontamination and final cleaning     Encapsulation  
 Other (describe)

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

**Acknowledgement (Optional)**

This occupant protection plan has been reviewed by the undersigned occupant or owner and all parties agree to the conditions set forth to protect occupants from lead-based paint exposure.

Occupant     Owner Name (Please Print)    \_\_\_\_\_    Date    Signature

Contractor Name (Please Print)    \_\_\_\_\_    Date    Signature