

**LEAD HAZARD RISK ASSESSMENT**  
Michigan Department of Licensing and Regulatory Affairs  
Child Care Licensing Bureau

**FACILITY**

Facility Name		Facility Phone Number	
Licensee Name		License Number	
Address		County	
City	State	Zip Code	

A lead hazard risk assessment must be completed of all child use areas, including any outdoor play areas, for a child care center built prior to 1978. For each room/area/wing inspected, indicate whether any lead hazards were found by indicating "yes" or "no." If lead hazards were found, the hazard must be addressed. Indicate "addressed" once a lead hazard has been satisfactorily addressed. If a lead hazard was found, list the hazards and how they were addressed.

**Note:** A lead hazard risk assessment determines the existence of current lead-based paint hazards and identifies options for reducing those hazards. For more information, go to [http://michigan.gov/dhs/0,4562,7-124-5529\\_49572\\_53751-336885--,00.html](http://michigan.gov/dhs/0,4562,7-124-5529_49572_53751-336885--,00.html).

	NO	YES	ADDRESSED	Room Name/Number/Wing of Building	List Lead Hazards and How Addressed
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Has additional documentation been provided to the applicant/licensee such as a narrative report, diagrams, etc.?

Yes       No

Has a Lead-Based Paint Inspection been done in conjunction with the Lead Hazard Risk Assessment (optional)?

Yes       No

If so, was lead-based paint present?

Yes       No

**LEAD HAZARD RISK ASSESSOR INFORMATION**

Name of Lead Hazard Risk Assessor		Date of Inspection	
Name of Company	Phone Number	Email Address	
Certification Number		Certification Expiration Date	
Signature			Date

LARA is an equal opportunity employer/program.

NO	YES	ADDRESSED	Room Name/Number/Wing of Building	List Lead Hazards and How Addressed
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