Clear Form

MSHDA
MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY

EMERGENCY SOLUTIONS GRANT (ESG)

Lead-Based Paint Property Owner Certification

Participant Information
Participant Name:
Unit Address:

The ESG Lead-Based Paint Property Owner Certification form is a tool program staff can use to have property owners/landlords certify that all paint stabilization activities have been completed in accordance with guidelines when formal clearance is not required (or as additional documentation when formal clearance is required). A copy of the completed form along with any additional documentation (i.e., a copy of the clearance report) should be kept in each program participant's file.

Instructions: To prevent lead-poisoning in young children, the ESG grantees must comply with the Lead-Based Paint Poisoning Prevention Act of 1973 and its applicable regulations found at 24 CFR 35, Parts A, B, M, and R. If a visual assessment reveals problems with paint surfaces, property owners/landlords must repair all identified problems with paint surfaces in accordance with the guidelines of 24 CFR 35, Parts A, B, M, and R, prior to a unit receiving ESG assistance. Property owners/landlords should complete this form to certify that all identified problems with paint surfaces have been repaired/stabilized in accordance with the guidelines.

Lead-Based Paint Compliance

1. Have all identified problems with paint surfaces been repaired?
   ☐ Yes ☐ No

2. Have all identified problems with paint surfaces been repaired using safe work practices?
   ☐ Yes ☐ No
   ☐ Not Applicable – the area of paint to be stabilized did not exceed the de minimis levels

3. Was a clearance exam conducted by an independent, certified lead professional?
   ☐ Yes ☐ No
   ☐ Not Applicable – the area of paint to be stabilized did not exceed the de minimis levels

4. Did the unit pass the clearance exam?
   ☐ Yes ☐ No
   ☐ Not Applicable – the area of paint to be stabilized did not exceed the de minimis levels
   Note: A copy of the clearance report should be placed in the program participant's file.

Owner/Landlord Certification
I certify that, to the best of my knowledge and belief, all the information presented and attached to this form is true, accurate, and complete.
Owner/Landlord Signature and Date:
Owner/Landlord Name:

Agency/Staff Certification
I certify that, to the best of my knowledge and belief, all the information presented and attached to this form is true, accurate, and complete.
Staff Signature and Date:
Staff Name:

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