



RECEIPT OF LEAD PAINT PAMPHLET


WAINWRIGHT	KRISTY	1268	68451474-1-EXDR
Customer Last Name	Customer First Name	Store/Branch #	Lead/PO No.
6289 DORCHESTER RD	LOCKPORT	NY	14094
Customer Address	City	State	Zip

PLEASE COMPLETE ONE OF THE TWO AREAS BELOW:

OWNER / OCCUPANT CONFIRMATION:

I am the (check one): ☒ Owner ☐ Occupant ☐ Both of the property listed above.


I have received a copy of the lead hazard information pamphlet informing me of the potential risk of the lead hazard exposure from renovation activity to be performed in my dwelling unit. I received this pamphlet before the work began

KRISTY WAINWRIGHT		5/5/2023
Printed Customer Name	Customer Signature	Date

IF A RENTAL, AND TENANT IS UNAVAILABLE, SERVICE PROVIDER MUST CHECK ONE OF THE BOXES BELOW AND SIGN WHERE INDICATED:

- ☐ **Declined** – I certify that I have made a good faith effort to deliver the lead hazard information pamphlet to the rental dwelling unit listed below at the date and time indicated and that the occupant declined to sign the confirmation of receipt. I further certify that I have left a copy of the pamphlet at the unit with the occupant
- ☐ **Unavailable for signature** – I certify that I have made a good faith effort to deliver the lead hazard information pamphlet to the rental dwelling unit listed below and that the occupant was unavailable to sign the confirmation of receipt. I further certify that I have left a copy of the pamphlet at the unit by sliding it under the door or by

(fill in how the pamphlet was left)

Vara , Christopher		5/5/2023
Service Provider's Printed Name	Service Provider's Signature	Date