Occupied Individual Unit Questionnaire Dwelling

adult resident ental unit, an To be completed by risk assessor and, for questions 15 & 16, the Property address: 238 45 /7

Property

LBP testing? (Y or I Apt. No.:

Year of construction: 1970 Prior LBP to Name of owner interviewed: 4 m k 4

Name of resident interviewed (if rentalm Name of risk assessor: 2000 Name of risk a

date:

date:

or visit live under age Do any children under a age 6, skip to Question?

If yes, how many?

the extent you to 9 each child under If yes, how many? 1

	Child 1	Child 2	Child 3	Chilld 4
(a) Age:	5			
(b) Blood lead level:				
(c) Month/year of blood lead test:				
(d) Location of bedroom:	000 x 3			
(e) Main room where child eats:	1 Labor			
(f) Main room where child plays:	Overy here			
(g) Main room where toys are stored:	May of the second of the secon			
(h) Main locations where child plays outdoors:	Fred Just			

investiga an environmental elevated blood lead of the HUD Guidelines].) had an Chapter 9 resident child under be necessary see

sills? window interior surfaces, painted D any childrentend to chew Yes PT

where?