

Form 5.0 Questionnaire for a Lead Hazard Risk Assessment of an Individual Occupied Dwelling Unit.

(Page 1 of 2)

(To be completed by risk assessor via interview with owner-occupant or, if a rental unit, an adult resident and, for questions 15 & 16, the owner.)

Property address: 777 HARRINGTON RD, FAIRMONT NC

Apt. No.: _____ Unit is: Owner occupied ☒ Renter occupied _____

Year of construction: _____ Prior LBP testing? (Y or N) _____

Name of owner interviewed: ANITA PLITMAN Owner interview date: 5/5/22

Name of resident interviewed (if rental unit): _____ Interview date: 1/1/

Name of risk assessor: F. Simoni

Children and Children's Habits

1. Do any children under age 6 live in the home or visit frequently? ☒ Yes ☐ No (If no children under age 6, skip to Question 5.)
2. If yes, how many? 3
3. Please provide the following information about each child under 6 to the extent you can.

	Child 1	Child 2	Child 3	Child 4
(a) Age:	<u>3</u>	<u>5</u>	<u>4</u>	
(b) Blood lead level:	<u>N/A</u>	<u>S</u>		
(c) Month/year of blood lead test:	<u>N/A</u>			
(d) Location of bedroom:	<u>N/A</u>			
(e) Main room where child eats:	<u>KITCHEN - BED ROOM</u>			
(f) Main room where child plays:	<u>LIVING ROOM</u>			
(g) Main room where toys are stored:	<u>ALL AND <u>LIVING ROOM</u></u>			
(h) Main locations where child plays outdoors:	<u>ALL AROUND HOUSE</u>			

(If a resident child under age 6 has had an elevated blood lead level, an environmental investigation may be necessary [see Chapter 16 of the HUD Guidelines].)

4. (a) Do any children tend to chew on any painted surfaces, such as interior window sills?

☐ Yes ☐ No

(b) If yes, where? NA