

Notice of Defect/Notice of Elevated Blood Level

Send this notice by certified mail, return receipt requested or hand-deliver this notice and get a signature from the property owner or the property owner's agent or manager.

To: _____
Name of Property Owner

Property Owner Address

City, State, Zip

From: _____
Your Name

Your Address

City, State, Zip

Phone

THIS IS TO NOTIFY YOU TO MEET THE MODIFIED RISK REDUCTION STANDARD AS REQUIRED BY § 6-819 OF THE ENVIRONMENT ARTICLE OF THE ANNOTATED CODE OF MARYLAND BECAUSE:

___ A child under the age of six years, or a pregnant woman, residing at the above address has been diagnosed with a blood lead level of 10 µg/dl or more on; **and/or**

___ The following defects require your attention:

The following areas contain peeling, chipping, flaking paint that is accessible to a child:

___ Living Room	___ Bathroom	___ Hallway	___ Door Frame
___ Dining Room	___ Front Porch	___ Stairway	___ Windows
___ Kitchen	___ Bedroom	___ Exterior Walls	___ Other _____

The following areas contain structural defects:

___ Living Room	___ Bathroom	___ Hallway	___ Door Frame
___ Dining Room	___ Front Porch	___ Stairway	___ Windows
___ Kitchen	___ Bedroom	___ Exterior Walls	___ Other _____

Other Hazardous Conditions:

PROPERTY OWNER / MANAGER SIGNATURE

I, _____ owner / manager of the above-noted property (circle one) hereby acknowledge receiving this Notice of Defect / EBL.

Signature _____ Date _____