## LSW/RRP Declaration and Checklist

Project Address:	Date:
Brief Description of Renovation:	
Name of Assigned Renovator:	
Name(s) of Trained Worker(s), if used:	
Name of Dust Sampling Technician, Inspector, or Risk Assessor, if used:	
Copies of renovator and dust sampling technician qualifications (training certificates, certifications)	ons) on file.
Certified renovator provided training to workers on (check all that apply):	
<ul><li>☐ Posting warning signs</li><li>☐ Setting up plastic containment barriers</li></ul>	
☐ Maintaining containment ☐ Avoiding spread of dust to adjacent areas	
☐ Waste handling ☐ Post-renovation cleaning	
Test kits used by certified renovator to determine whether lead was present on components aff (identify kits used and describe sampling locations and results):	
Warning signs posted at entrance to work area.	
Work area contained to prevent spread of dust and debris:	
<ul> <li>All objects in the work area removed or covered (interiors)</li> </ul>	
☐ HVAC ducts in the work area closed and covered (interiors)	
☐ Windows in the work area closed (interiors)	
☐ Windows in and within 20 feet of the work area closed (exteriors)	
<ul><li>Doors in the work area closed and sealed (interiors)</li></ul>	
☐ Doors in and within 20 feet of the work area closed and sealed (exteriors)	
☐ Doors that must be used in the work area covered to allow passage but prevent spread of o	dust
Floors in the work area covered with taped-down plastic (interiors)	
☐ Ground covered by plastic extending 10 feet from work area – plastic anchored to building heavy objects (exteriors)	and weighted down by
☐ If necessary, vertical containment installed to prevent migration of dust and debris to adjacent	ent property (exteriors)
Waste contained on-site and while being transported off-site.	
Work site properly cleaned after renovation:	
All chips and debris picked up, protective sheeting misted, folded dirty side inward, and tap	ed for removal
☐ Work area surfaces and objects cleaned using HEPA vacuum and/or wet cloth's or mops (in	teriors)
Certified renovator performed post-renovation cleaning verification (describe results, including cloths used):	the number of wet and dry
☐ If dust clearance testing was performed instead, attach a copy of the report.	
I certify under penalty of law that the above information is true and complete.	
Name of Firm/Agency:	
Name and Title Date	

Attach Copy of RRP Certification to this form.