

INSTRUCTIONS FOR NOTICE OF ABATEMENT FORM

The Oregon Administrative Rules Chapter 333 Division 69 requires that the Oregon Health Authority be notified at least five business days (not calendar days) before the start date of an abatement project. A “Notice of Abatement” form must be completed and submitted to the Authority to fulfill this requirement. The Notice of Abatement form shall be utilized to notify the Authority when regulated lead-based paint abatement activity is occurring. A Notice of Abatement should not be filed with the Authority for interim control work or renovation. A copy of the occupant protection plan and the project scope should be kept available at the site. The Authority may retain these documents as part of the project record.

Please fill out the Notice of Abatement form in its entirety. No section should be left blank. Instruction item 1 corresponds to Section 1 in the Lead-Based Paint Notice of Abatement form.

1. The notification type must be checked.
 - An original notification must be received by the Authority five business days (not calendar days) prior to the start of the lead-based paint abatement project. Indicate the approximate time of day the project is anticipated to start and when the lead-based paint project activities will be completed.
 - Project cancellations must be received by the Authority on or before the start date.
 - If the start date is delayed, an amendment must be received by the Authority on or before the start date being amended. An amendment is requested for any changes from the original notification and provided to the Authority no less than twenty-four hours prior to the change, including stop date changes. Please circle the amendment number each time a notification is revised and resubmitted.
 - Requests for exceptions to the five-day notification requirement can be made for abatement activities required in response to an elevated blood lead level (EBLL) determination, or Federal, State, or local emergency abatement order. The notice should be received by the Authority as early as possible before, but must be received no later than, the start date of the abatement activities. Notification start date and/or location changes must be received by the Authority on or before the start date provided to the Authority. Documentation of the circumstances requiring the exception must be provided to the Authority with the Notice of Abatement.
2. The firm’s name, address, phone number, and certification number must be provided. The project supervisor(s) must be stated, his/her certification number, and site phone number where the supervisor can be reached.
3. Provide the lead-abatement project site address. Check the current use of the property. Is it occupied? What type of dwelling is the property?
4. Check the types of surfaces and components that are to be abated. Briefly describe the method to be utilized in the abatement (i.e.; encapsulation, enclosure, replacement or removal). Estimate component numbers and/or linear or square feet to be abated.
5. Describe work practice and engineering controls, specific to the project, used to prevent contamination. Example: Wet scraping surfaces in conjunction with HEPA vacuuming.
6. Describe how lead-based paint waste, specific to the project, is handled to prevent lead-based paint contamination. Example: Wrapping windows with 6-mil poly and securing the wrapped windows in a lined roll-off.
7. The certification section requires a signature of the applicant along with the printed name, title, and date the Lead-Based Paint Notice of Abatement was signed.



NOTICE OF ABATEMENT

Oregon Health Authority
Lead-Based Paint Program
800 NE Oregon Street, Ste. 640
Portland, OR 97232
Phone: (971) 673-0440
Fax (971) 673-0457 or email to
leadprogram@odhsoha.oregon.gov

1. Type of Notification: (please print or type)

Original 5 Day Notification	Start Date:	Time:	Stop Date:
Cancellation	Amendment		
☐ Request for Exception to 5-day Requirement (Describe circumstances. Applicable to abatement in response to an elevated blood lead level (EBL), or a Federal, State or local emergency abatement order. Include documentation of circumstances. Must be received by the Authority no later than abatement start date.)			

2. Applicant Information:

Abatement Firm Name:		Certification No.	
Business Address:		Business Phone ()	
City:	State:	Zip Code:	
Supervisor Name:		Certification No.	Phone ()
Supervisor Name:		Certification No.	Phone ()

3. Project Information: (Lead-Based Paint Activity)

Project Address:		County:	
City:	State:	Zip Code:	
Current use of Property: (Check all that apply) ☐ Occupied ☐ Unoccupied ☐ Unknown			
☐ Private Home ☐ Multi-Complex ☐ Child Care Facility ☐ School ☐ Other (specify)			

4. Abatement Methods:

Check applicable abatement surfaces and components. Briefly describe abatement methods (i.e.; encapsulate, enclosure, replacement or removal.) Estimate component numbers and/or linear or square feet.	
☐ Trim Molding (baseboards, windows, doors, etc.)	
☐ Interior Surfaces (doors, plaster/drywall, floors, etc.)	
☐ Exterior Surfaces (siding, porches, soffits, etc.)	
☐ Soil Removal	
☐ Other (describe)	

5. Work Practices:

Describe work practices and engineering controls, specific to the project, used to prevent lead-based paint contamination:
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6. Waste Handling:

Describe waste handling procedures, specific to the project, used to contain and prevent lead-based paint contamination:
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7. Certification:

I certify that the firm and employees performing lead-based paint activities on this project are certified and licensed as required by Oregon Administrative Rules 333-069 and that the information provided on this notification is true and accurate, to the best of my knowledge.

Signature of applicant _____ Date _____

Please print name _____ Title _____

This form must be received by the Authority at least five business days prior to the start of the project to comply with the notification requirements established by Oregon Administrative Rule 333-069.

Is this abatement project based on the recommendations of a risk assessor report? Yes No

If Yes, please provide the name of the certified risk assessor: _____

Lead-Based Paint Program Use Only

Date Received:	Reviewed By:	Firm File No:
☐ Accepted	☐ Rejected	☐ Incomplete application information
		☐ Incomplete project information
		☐ Incomplete firm information
☐ Accepted pending waiver		☐ Unsigned application
		☐ Other