



MICHIGAN DEPARTMENT OF LABOR AND ECONOMIC GROWTH  
MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY

HOMELESS PREVENTION AND  
RAPID RE-HOUSING PROGRAM

Local Office: \_\_\_\_\_

**SUMMARY NOTICE OF LEAD-BASED PAINT RISK ASSESSMENT**

**\*\* (for pre-1978 housing with a child age 6 or under who has an identified environmental intervention blood level)**

**\*\*\* THIS FORM MUST BE COMPLETED BY A CERTIFIED LEAD-BASED PAINT RISK ASSESSOR AFTER THE RISK ASSESSMENT HAS BEEN COMPLETED**

Address/location of property or structure(s) this summary notice applies to:  
\_\_\_\_\_  
\_\_\_\_\_

**Lead-based paint risk assessment description:**

Date(s) of risk assessment: \_\_\_\_\_

**Summary of risk assessment results (check all that apply):**

- No lead-based paint hazards were found.
- Lead-based paint hazards were found.
- A brief summary of the findings of the risk assessment is provided below (required if lead-based paint hazards were found).

**Summary of types and location of lead-based paint hazards.** List the housing unit numbers and common areas (for multifamily housing), bare soil locations, dust-lead locations, and/or building components (including type of room or space, and the material underneath the paint), and types of lead-based paint hazards found:  
\_\_\_\_\_  
\_\_\_\_\_

**Contact person for more information about the risk assessment:**

Printed Name: \_\_\_\_\_ Organization: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Person who prepared this summary notice:**

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Organization: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Distribution:  
Tenant, Landlord, HPRP Administrator

**HPRP Use Only**  
Tenant Name \_\_\_\_\_  
HPRP Administrator \_\_\_\_\_