# NEW JERSEY DEPARTMENT OF COMMUNITY AFFAIRS Division of Housing and Community Resources

### Lead Safety Test Kit Documentation Form

#### **Owner Information**

| 1 ddragg.  |                     |   |  |
|--|---------------------|---|--|
| Address:<br>City:  | State:              | Zip code:   | Contact #:   |
|  |                     | 1   |  |
| enovation Information  |                     |   |  |
| Fill out all the following informati<br>Renovator.   | ion that is availal | ble about the Renova  | tion Site, Firm, and Certified   |
| Renovation Address:  |                     |   |  |
| City:  | State:              | Zip code:   | Year Built   |
| Certified Firm Name:   |                     |   |  |
| Address:   |                     |   |  |
| City:  | State:              | Zip Code:   | Contact  |
| #:   |                     | _   |  |
|  |                     |   |  |
| Certified Renovator Name:  |                     | Date Cert   | ified:/  |
| Certified Renovator Name:  |                     | Date Cert   | ified://   |
|  |                     | Date Cert   | ified://   |
| est Kit Information  |                     |   |  |
| Yest Kit Information<br>Use the following blanks to identi   |                     |   |  |
| Yest Kit Information<br>Use the following blanks to identi<br>Test Kit #1  | fy the test kit or  | test kits used in testin  | g components.  |
| Yest Kit Information<br>Use the following blanks to identi<br>Test Kit #1<br>Manufacturer:   | fy the test kit or  | test kits used in testin<br>Manufacture D   | a <b>g components.</b>   |
| Yest Kit Information<br>Use the following blanks to identi<br>Test Kit #1<br>Manufacturer:<br>Model:   | fy the test kit or  | test kits used in testin<br>Manufacture D<br>Serial #:  | a <b>g components.</b>   |
| Yest Kit Information<br>Use the following blanks to identi<br>Test Kit #1<br>Manufacturer:<br>Model:   | fy the test kit or  | test kits used in testin<br>Manufacture D<br>Serial #:  | a <b>g components.</b>   |
| Yest Kit Information       Use the following blanks to identif       Test Kit #1       Manufacturer:       Model:       Expiration Date:       Test Kit #2   | fy the test kit or  | test kits used in testin<br>Manufacture D<br>Serial #:  | a <b>g components.</b><br>Pate (if available): <u>/</u> /                                    |
| Set Kit Information       Use the following blanks to identif       Test Kit #1       Manufacturer:       Model:       Expiration Date:       Test Kit #2       Manufacturer:  | fy the test kit or  | test kits used in testin<br>Manufacture D<br>Serial #:<br>Manufacture D                               | ag components.   |
| Test Kit Information       Use the following blanks to identif       Test Kit #1       Manufacturer:       Model:       Expiration Date:       Test Kit #2       Manufacturer:       Model:       Output       Manufacturer:       Manufacturer:       Manufacturer:       Manufacturer:   | fy the test kit or  | test kits used in testin<br>Manufacture D<br>Serial #:<br><br>Manufacture D<br>Serial #:              | ag components.   |
| Seet Kit Information       Use the following blanks to identify       Test Kit #1       Manufacturer:       Model:       Expiration Date:  | fy the test kit or  | test kits used in testin<br>Manufacture D<br>Serial #:<br><br>Manufacture D<br>Serial #:              | ag components.   |
| Gest Kit Information       Use the following blanks to identity       Test Kit #1       Manufacturer:       Model:       Expiration Date:       Manufacturer:       Manufacturer:       Expiration Date:       Model:       Expiration Date:       Model:       Model:       Model:       Model:   | fy the test kit or  | test kits used in testin<br>Manufacture D<br>Serial #:<br><br>Manufacture D<br>Serial #:              | ag components.   |
| Sest Kit Information       Use the following blanks to identify       Test Kit #1       Manufacturer:       Model:       Expiration Date:       Test Kit #2       Manufacturer:       Model:       Expiration Date:       Model:       Test Kit #2       Manufacturer:       Model:       Test Kit #3  | fy the test kit or  | test kits used in testin<br>Manufacture D<br>Serial #:<br><br>Manufacture D<br>Serial #:              | ag components.   |
| Yest Kit Information       Use the following blanks to identif       Test Kit #1       Manufacturer:       Model:       Expiration Date:       Test Kit #2       Manufacturer:       Model:       Expiration Date:       Test Kit #2       Manufacturer:       Model:       Test Kit #3       Manufacturer:  | fy the test kit or  | test kits used in testin<br>Manufacture D<br>Serial #:<br>Manufacture D<br>Serial #:<br>Manufacture D | eg components.<br>Pate (if available)://<br>Pate (if available)://<br>Pate (if available):// |
| Yest Kit Information       Use the following blanks to identif       Test Kit #1       Manufacturer:       Model:       Expiration Date:       Test Kit #2       Manufacturer:       Model:       Expiration Date:       Test Kit #2       Manufacturer:       Model:       Expiration Date:       Test Kit #3       Manufacturer:       Model:       Solution       Manufacturer: | fy the test kit or  | test kits used in testin Manufacture D Serial #: Manufacture D Serial #: Manufacture D Serial #:      | ag components.   |
| Yest Kit Information       Use the following blanks to identify       Test Kit #1       Manufacturer:       Model:       Expiration Date:       Test Kit #2       Manufacturer:       Model:       Expiration Date:       Test Kit #2       Manufacturer:       Model:       Test Kit #3       Manufacturer:   | fy the test kit or  | test kits used in testin Manufacture D Serial #: Manufacture D Serial #: Manufacture D Serial #:      | eg components.<br>Pate (if available)://<br>Pate (if available)://<br>Pate (if available):// |

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### Lead Safety Test Kit Documentation Form

| Renovation Address:<br>City:                   | ~                                    |                                 |            |            |            |
|--|--------------------------------------|---------------------------------|------------|------------|------------|
| City:  | State                                | : Zip Code                      | e:         |            |            |
| ttach picture of testing sw                    | ab for every loca                    | tion tested:                    |            |            |            |
| Test Location#:<br>Description of component t  |                                      |                                 |            |            | Test Kit#3 |
| Result: Is lead present? (C   Date of test:    |                                      |                                 | NO         | Presumed   | 1          |
| Test Location#:<br>Description of component t  |                                      |                                 |            |            |            |
| Result: Is lead present? (O Date of test://    |                                      |                                 | NO         | Presumed   | 1          |
| Test Location#:<br>Description of component t  | Test Kit Used<br>ested including loc | l (Circle only one):<br>cation: | Test Kit#1 | Test Kit#2 | Test Kit#3 |
| Result: Is lead present? (C<br>Date of test:// |                                      |                                 | NO         | Presumed   | 1          |
| Test Location#:<br>Description of component t  |                                      |                                 |            |            |            |
| Result: Is lead present? (O Date of test://    | Circle only one):                    | YES                             | NO         | Presumed   | 1          |
| Test Location#:<br>Description of component t  |                                      |                                 |            |            |            |
| Result: Is lead present? (C                    | Circle only one):                    | YES                             | NO         | Presumed   | 1          |

Date of test:\_\_\_/\_\_/