SCOPE OF WORK

Project Name: DCA Lead Assistance Program

Age of Unit: _____

Name:

File Number: _____

Property Address: _____

LOCATION	ITEM TYPE	WALL	#	HESWAP WORK DESCRIPTION	NOTES FOR CONTRACTOR	UNIT PRICE	PRICE
							$0
							$0
							$0
							$0
							$0
							$0

							$0
							$0
							$0
							$0
							$0
							$0
							$0
							$0
							$0
							$0
							$0
				Cleaning: Unit cleaning for clearance			$0
				Disposal of lead components			$0
							$0

Lead Contractor Signature	Name of Contractor	Date:

LCM Signature	Name of Lead Construction Manager	Date

Item Type: i.e. Window, door, roof, baseboard, handrail, stair, sheetrock, paint, disposal, cleaning, etc.
List all lead recommendations from Lead Risk Assessment separately by location. Attach LRA as necessary
All scopes of work must include line item for: Debris Removal and Cleaning.