

Project Designer/Supervisor/Abatement Worker

Lead-Based Paint Activity Quarterly Report

Instructions:

- Save document to your computer
- Fill out form (typing your name on signature line field)
- Save your changes
- Click on the email address located at the bottom of form
- Attach this document to email
- Send email



Project Designer/Supervisor Lead-Based Paint Activity Quarterly Report



<input type="checkbox"/> Qtr 2 Apr-June (Due Jul 10 th)	<input type="checkbox"/> Qtr 3 July-Sep (Due Oct 10 th)	<input type="checkbox"/> Qtr 4 Oct-Dec (Due Jan 10 th)	<input type="checkbox"/> Qtr 1 Jan-March (Due Apr 10 th)
20__	20__	20__	20__

_ **No Lead-Based Paint Activity performed this quarter.**

Note: Choose a report quarter. A separate report required for each quarter

Property Information	Activity Date	Abatement Workers (list of workers that worked on property)		Abatement Type (check all that apply)
Date Built (Do not use unknown): _____ Address: _____ City: _____ Zip: _____	Start Date: _____ Stop Date: _____	Name: 1.) _____ 2.) _____ 3.) _____ 4.) _____	Certification Number: 1.) _____ 2.) _____ 3.) _____ 4.) _____	<input type="checkbox"/> Interior Abatement <input type="checkbox"/> Exterior Abatement <input type="checkbox"/> Soil Abatement <input type="checkbox"/> Other: _____
Date Built (Do not use unknown): _____ Address: _____ City: _____ Zip: _____	Start Date: _____ Stop Date: _____	Name: 1.) _____ 2.) _____ 3.) _____ 4.) _____	Certification Number: 1.) _____ 2.) _____ 3.) _____ 4.) _____	<input type="checkbox"/> Interior Abatement <input type="checkbox"/> Exterior Abatement <input type="checkbox"/> Soil Abatement <input type="checkbox"/> Other: _____
Date Built (Do not use unknown): _____ Address: _____ City: _____ Zip: _____	Start Date: _____ Stop Date: _____	Name: 1.) _____ 2.) _____ 3.) _____ 4.) _____	Certification Number: 1.) _____ 2.) _____ 3.) _____ 4.) _____	<input type="checkbox"/> Interior Abatement <input type="checkbox"/> Exterior Abatement <input type="checkbox"/> Soil Abatement <input type="checkbox"/> Other: _____

Please e-mail to Shaun-west@cherokee.org or mail to Cherokee Nation, Environmental Programs, P.O. Box 948, Tahlequah, OK 74465

Project Designer/Supervisor Name: _____ Certification #: _____ Date: _____