

[Insert Company Name]

[Insert Date of Clearance Examination]

[Insert Client's Full Name]

[Mailing Address]

[City, State Zip Code]

Subject: Clearance Examination – [Insert full address/location of where clearance was conducted]. If there is a lead permit associated, include the permit # e.g. 1200 First Street, NE Washington, DC 20002 (LPXX-XXXX)

Dear: [Insert Client name],

On [Insert date of clearance examination], [Insert name of clearance examiner's name], a D.C. certified [pick one: Risk Assessor, Inspector or Dust sampling Technician] [insert D.C. certification number, e.g. (DC16-XXX)] performed a clearance examination at [Insert the full address of the clearance examination]. Briefly describe the property ([hyper link to Office of Tax and Revenue](#)) (optional) e.g. The property is a two (2) story, residential semi-detached single-family dwelling. The property consists of: five (5) bedrooms, four (4) baths, living room, kitchen, dining room, den, upper hall and basement.

Briefly summarize the clearance examination- e.g. On [Insert date of clearance examination], a visual assessment performed at the property in work areas where the lead-remediation occurred indicated that all components were intact and no dust/debris was visible on surfaces. Ten (10) dust and/or soil samples were collected to determine if the presence of lead-contaminated dust and/or soil exist post lead-remediation. None of the dust samples were above the District's clearance thresholds for lead contaminated dust and/or soil.

OR The visual assessment indicated surfaces were not intact and evidence of dust/debris was observed... [insert the location(s) AND/OR Dust and/or soil samples collected from the property were above the District's clearance threshold for lead-contaminated dust and/or soil). This clearance was conducted in in response to DOEE Administrative Order No. _____. OR According to the owner, this property is not subject to any DOEE Administrative Orders.

If the initial clearance failed and there was/were retesting, use standards below that are applicable

e.g. On [Insert date of retest clearance examination], a visual assessment was performed on failed painted surfaces and dust and/or soil samples were collected from areas that failed the initial clearance on [Insert date of initial clearance examination]. The visual assessment indicated painted surfaces inspected were intact and no evidence of dust and debris existed at the

time of the visual assessment. All dust and/or soil samples collected were below the District's clearance thresholds for lead-contaminated dust and/or soil.

OR The visual assessment indicated surfaces were deteriorated and dust and debris was observed... and/or Dust and/or soil samples collected on **[Insert date of retest clearance examination]** exceeded the District's clearance threshold for lead-contaminated dust and/or soil. (Repeat this until the property passes)

Conclusion

Based on a visual assessment of all work areas and painted surfaces at the property, dust wipe sampling and (include if soil samples were collected) soil sampling, **(delete the soil if no soil samples collected)** the lead-based paint hazard reduction work meets (or did not meet) the requirements of the District's clearance standards. OR did not meet the District's clearance standards-**(used only if no retest is requested by client)**.

DISTRICT'S THRESHOLDS

- Floors 40µg/ft²
- Windowsills 250µg/ft²
- Window wells 400µg/ft²
- Bare soil 400ppm
- Exterior concrete or other rough exterior surfaces 800µg/ft²

RECOMMENDATIONS

e.g. Ongoing monitoring, occupant safety, etc...

If you have any questions or additional information is required, please contact **[Insert Clearance Examiner Name]** at **[Insert contact number]** and/or email at **[Insert [email address](#)]**.

Sincerely,

Insert Name of Clearance Examiner

John DOEE

Insert D.C. certification number

DCXX-XXXX

Attachments:

- DOEE Documents Issued (if required by clearance protocol)
- Supervisor's Work Plan/Scope of Work (if required by clearance protocol)
- Photographs with Captions (if required by clearance protocol)
- Environmental Samples and Chain of Custody (if required by clearance protocol)
- Floor Plan/Site Map (if required by clearance protocol)
- Copy of Current DOEE issued certification card
- Accredited lab information (if required by clearance protocol)