

# AUSTRAL

## HOUSING INSPECTIONS



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Date		Name								
Address										
<b>LEAD INSPECTION FORM</b>		Kitchen	Living room	Dining room	Front bedroom	Rear bedroom	Bathroom	Hallway	Laundry / Utility	Other Room
(Circle conditions on the left column and check boxes on the right side)										
<b>ITEM - CONDITION</b> ↓	<b>ROOM</b> ⇒									
<b>WINDOWS</b> - Drag excessively, paint peeling / chips at sill / trough. Other (describe).										
<b>DOORS</b> - Drag on frame / veneer, paint peeling / chips. Other (describe).										
<b>FLOORING</b> - Peeling top coat. Excessive wear & tear. Recent refinishing. Other.										
<b>CEILING AND WALLS</b> - Paint peeling / chips, excessive wear & tear, cracks / holes.										
<b>CABINETS</b> - Door/ drawers drag excessively. Peeling paint / chips. Other (describe).										
<b>MISCELLANEOUS</b> (paint peeling at) - Heater / flue pipe, fences and gates, stairs (ie handrails), siding, trims, windows. Other (describe)										
<b>GROUND</b> S - Soil by structure and at children's play area recent remodeling, painting, grounds disturbed, new soil brought-in. Dry sanding, sand blasting, abrasive sanding, torch sanding, major construction work nearby. Dust in the air.										
<b>EXTERIOR</b> - Peeling paint / chips at siding, moldings / frames / trim, windows, doors, stairs, fences / gates, children play equipment. Other (describe)										
<b>MISCELLANEOUS ISSUES</b> - Structure built before 1978, Medicines recalled or non FDA approved, candies recalled or imported. Any of these issues noted at adjacent dwellings / structures, or any other structure where occupants frequent (ie friends, relatives, schools).  Major construction / demolition nearby, contaminated air, excessive dust, paneling / siding work, window / door installation, landscaping, work areas not contained.  Home cookware (ie bowls, pitchers) paint chipping off.										
<b>OCCUPANT(S) ISSUES</b>										
Housing member engaged in the construction / paint trade?										
Housing member engaged in work with lead products?										
Housing member engaged in home hobbies (lead glass, soldering (ie electronics), pottery, ceramics, painting)?										
Children at dwelling?										
How many children?										
Age of children										
Elevated Blood Level (EBL) children at this dwelling?										
Elevated Blood Level (EBL) children at adjacent dwellings?										
Do children at this dwelling exhibit health issues?										
Has owner handed out EPA pamphlet "Lead Hazard In our Home"?										
Other / Comments:										