Company: __________________________ Property Address: __________________________

Work will begin on (abatement start date): __________ Work will end on (abatement end date): __________

Work will be under the control of: (list certified supervisors) ____________________________________
______________________________________________________________________________________
______________________________________________________________________________________

☐ The residents will be relocated until the work is completed and clearance has been achieved.

OR

☐ The residents will be restricted from work areas until clearance is confirmed by using the following methods:

<table>
<thead>
<tr>
<th>Work Area</th>
<th>Method of restricting access</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The following work practices and engineering controls will be used to minimize contamination in the residence

☐ Work area containment ☐ Wet methods ☐ Decontamination and final cleaning ☐ Encapsulation
☐ Other (describe)________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

Acknowledgement (Optional)

This occupant protection plan has been reviewed by the undersigned occupant or owner and all parties agree to the conditions set forth to protect occupants from lead-based paint exposure.

☐ Occupant ☐ Owner Name (Please Print) __________________________ Date __________ Signature

Contractor Name (Please Print) __________________________ Date __________ Signature

Addition information may be listed on the reverse side of this form.

DCH-1109 (05/11) Authority: Act 368 of P.A. of 1978, as amended

The provision of information relative to this form is mandatory pursuant to R 325.9917 (4) (a) and (b)
The use of this form version is optional.
The provision of information relative to this form is mandatory pursuant to R 325.9917 (4) (a) and (b)
The use of this form version is optional.