



## **Client Notification of Relocation**

(To be completed at the time of application)

I, \_\_\_\_\_ (name) understand that all occupants may be required to vacate the premises at \_\_\_\_\_ (address) during the course of the Lead Remediation Process, and shall not re-enter the dwelling until a satisfactory Lead Clearance Test has been obtained. I also understand that any occupants who re-enter the dwelling during the Lead Remediation Process may put children at risk of lead poisoning and prevent the dwelling from being declared "lead-safe." \_\_\_\_\_

My signature also authorizes Metropolitan Partnership for Lead Safe Housing, its designees or contractors to lock the dwelling and restrict access to the dwelling for the duration of the Lead Remediation Process, if occupants or other persons do not voluntarily stay out of the dwelling at all times. \_\_\_\_\_

I understand that before contracts can be signed, all children under age 6 who live in the premises, or regularly visit the premises must have a blood test for lead, and that these same children must have a blood test for lead any time from 30 days to 60 days after all clearance tests have passed. \_\_\_\_\_

I certify that I will meet the above terms and that failure to comply may result in cancellation of the work and/or suspension of benefits from the Metropolitan Partnership for Lead Safe Housing.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date