

**LEAD-WORK PRE-JOB NOTIFICATION**



Annual Notification for Steel Structures

(\*Note: items marked are required)

*Name of employer doing 'Lead Work'		*Address	*Zipcode	*Phone
_____		_____		_____
Calif. Cont. Lic. No. (if applicable)		_____		Pager/cellular phone no. _____
Supervisor:		*Number of lead-job workers: (Check one below)		
* Supervisor name: _____		1 - 5	31 - 40	
California Department of Health Services Lead Cert. No. (if applicable)		6 - 10	41 - 50	
		11 - 20	> 50	
		21 - 30		

*Job start date/time	*Job completion date/time	Shift (Check all that apply) Day Swing Graveyard Other	*Approximate duration of 'Lead Work' in days
_____	_____	_____	_____
*Street address or location of job		City	Nearest cross street
_____		_____	_____
		County	Zipcode
		_____	_____

*Precise location of work (building no., room no., etc.)				
Entity contracting the lead-work (check one)		Address	Zipcode	Phone
Premises Owner      Lessee		_____	_____	_____
				Pager/cellular phone no. _____
Type of structure and use: (Check all that apply)				
Office Building	Residence	Steel Structure/Type _____		
Public Access/Commercial	School	Other _____		

Scope of work and work practices:			
*Describe lead-related work to be done (check all that apply)			
Surface Preparation	Wall Repair	Other _____	
Water/Moisture Damage Repair	Paint Removal		
Window/Door Repair/Replacement	Demolition		
*Describe paint removal methods (Check all that apply):			
Manual Scraping/Sanding	Demolition	Hydroblasting	Other work practices disturbing lead:
Power Sanding/Grinding	Heat Guns	Torch Cutting	_____
Chemical Stripping	Abrasive Blasting	Welding	

*Amount of area to be disturbed: (Check one per column)	
< 10 square feet	< 10 linear feet
10 - 100 square feet	10 - 100 linear feet
101 - 1000 square feet	100 - 1000 linear feet
> 1000 square feet	> 1000 linear feet

Torch cutting/welding
Duration of work: _____
Concentration of lead in disturbed materials:
_____ parts per million (ppm)
_____ mg/cm <sup>2</sup>
_____ % percent by weight
Assumed to be lead-containing: YES

Name of Notifier:	Title:	Date:
_____	_____	_____