WisWAP BID#	
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Wisconsin Weatherization Assistance Program RENOVATION RECORDKEEPING CHECKLIST

Name of Company/Agency:	Date(s) of Renovation:
Address of Renovation:	
Brief Description of Renovation:	
Name of Assigned Certified Lead Safe Renova	tor:
Name(s) of Trained Lead Safe Workers used:	
☐ Certified renovator provided training to work ☐ Posting warning signs ☐ Setting ☐ Maintaining containment ☐ Avoidin ☐ Waste handling ☐ Post-re ☐ Warning signs posted at entrance to work are ☐ Work area contained to prevent spread of dur ☐ All objects in the work area removed ☐ HVAC ducts in the work area closed ☐ Windows in the work area closed (int ☐ Windows in and within 20 feet of the ☐ Doors in the work area closed and sea ☐ Doors in and within 20 feet of the work ☐ Doors that must be used in the work area covered with ☐ Ground covered by plastic extending and weighted down by heavy objects (extending and	up plastic containment barriers ng spread of dust to adjacent areas novation cleaning ea. st and debris: or covered (interiors) and covered (interiors) teriors) work area closed (exteriors) aled (interiors) ork area closed and sealed (exteriors) area covered to allow passage but prevent spread of dust taped-down plastic (interiors) 10 feet from work area—plastic anchored to building
for removal ☐ Work area surfaces and objects clean (interiors)	
☐ I certify under penalty of law that the above	information is true and complete.
Signature of Assigned Certified Lead Safe Ren	ovator Date