



Project Designer/Supervisor Lead-Based Paint Activity Quarterly Report



For DEQ Use Only:
 Entry#:
 Date Entered:

<input type="checkbox"/> Qtr 2 Apr-June (Due Jul 10 th) <input style="width: 50px;" type="text" value="20__"/>	<input type="checkbox"/> Qtr 3 July-Sep (Due Oct 10 th) <input style="width: 50px;" type="text" value="20__"/>
<input type="checkbox"/> Qtr 4 Oct-Dec (Due Jan 10 th) <input style="width: 50px;" type="text" value="20__"/>	<input type="checkbox"/> Qtr 1 Jan-March (Due Apr 10 th) <input style="width: 50px;" type="text" value="20__"/>

No Lead-Based Paint Activity performed this quarter.
Note: Choose a report quarter. A separate report required for each quarter

Property Information	Activity Date	Abatement Workers (list of workers that worked on property)		Abatement Type (check all that apply)
Date Built (Do not use unknown): <input style="width: 50px;" type="text"/> Address: <input style="width: 100%;" type="text"/> City: <input style="width: 100%;" type="text"/> Zip: <input style="width: 100%;" type="text"/>	Start Date: <input style="width: 100%;" type="text"/> Stop Date: <input style="width: 100%;" type="text"/>	Name: 1.) <input style="width: 100%;" type="text"/> 2.) <input style="width: 100%;" type="text"/> 3.) <input style="width: 100%;" type="text"/> 4.) <input style="width: 100%;" type="text"/>	Certification Number: 1.) <input style="width: 100%;" type="text"/> 2.) <input style="width: 100%;" type="text"/> 3.) <input style="width: 100%;" type="text"/> 4.) <input style="width: 100%;" type="text"/>	<input type="checkbox"/> Interior Abatement <input type="checkbox"/> Exterior Abatement <input type="checkbox"/> Soil Abatement <input type="checkbox"/> Other: <input style="width: 100%;" type="text"/>
Date Built (Do not use unknown): <input style="width: 50px;" type="text"/> Address: <input style="width: 100%;" type="text"/> City: <input style="width: 100%;" type="text"/> Zip: <input style="width: 100%;" type="text"/>	Start Date: <input style="width: 100%;" type="text"/> Stop Date: <input style="width: 100%;" type="text"/>	Name: 1.) <input style="width: 100%;" type="text"/> 2.) <input style="width: 100%;" type="text"/> 3.) <input style="width: 100%;" type="text"/> 4.) <input style="width: 100%;" type="text"/>	Certification Number: 1.) <input style="width: 100%;" type="text"/> 2.) <input style="width: 100%;" type="text"/> 3.) <input style="width: 100%;" type="text"/> 4.) <input style="width: 100%;" type="text"/>	<input type="checkbox"/> Interior Abatement <input type="checkbox"/> Exterior Abatement <input type="checkbox"/> Soil Abatement <input type="checkbox"/> Other: <input style="width: 100%;" type="text"/>
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Please e-mail to LBPReporting@DEQ.OK.GOV or mail to Department of Environmental Quality, Attn: LBP Staff, PO Box 1677, Oklahoma City, OK 73101-1677

Project Designer/Supervisor Name: Certification#: Date: