



State of Nebraska Weatherization Assistance Program
Lead Safe Observation Report

FORM
WX11

Client Name: Job Number:
Street Address: City: Year of Home: Date
NEO Monitor: Certified Renovator (RRP) Name / Firm Name: Contact Number

HEALTH AND SAFETY TESTING

Did RRP Have Certification Documentation on Site? Did RRP Provide on-site Training?

Who conducted lead-based paint testing?

Is RRP present at time of NEO observation? Can RRP be reach by phone?

Is RRP present during work set up? During Clean-up?

Does RRP have proper records for work summary, training, and certifications? Are signs posted?

Is ground cover needed and correct distance or retaining wall in place?

Were all proposed work areas swab tested? Were pictures taken?

Note: Pictures should include:

- 1. Swab Test 3. Barricade and Signage 4. Indoor Containment 2. PPE 5. Outdoor Containment
6. Bagged With Gooseneck Trash 7. HEPA Vacuum and Dirty Diaper Test

Notes:

Areas of Lead Safe Work:

Additional Notes: