

Lead Project Notification Form LPF-3 Louisiana Department of Environmental Quality OES, Public Participation and Permit Support Division Notifications and Accreditations Section P.O. Box 4313, Baton Rouge, LA 70821-4313 Phone (225) 219-3300 Fax (225) 325-8282

For LDEQ Use Only				
Site AI No.				
Contractor AI No.				
LPN No.				
Expires:				
Check No.				
Check Date:				
Amt Received: \$				
Date Received:				
Processed Date:				

This form must be completed and p requirements of LAC 33:III.2811.								
I. Type of Notification:	tial Amendmen	nt [Cance	ellation		Eme	rgency (les	s than 5 day notification)
II. Applicant Information: (please	e print or type)				_			
Company Name:					Contractor License No.			
Business Address:					Phone No. ()			
City:	State:	State: Zip:			Email:			
Project Supervisor:	Email Addres	s:	Fax No. ())	
LDEQ Accreditation No.	Issue Date:	Issue Date:				Expiration Date:		
III. Single Family Dwelling:								
Occupant Name:								
Property Address:								
City:	Parish:				State:			Zip Code:
Property Owner/Manager:				Phone No. ())
Property Owner/Manager Address	::							
City:			State:					Zip Code:
Square Footage/Acreage to be Aba	ated:							
IV. Check One of the Following	Types of Dwellings:	[Multi	-Family	Dwe	lling		Child-occupied Facility
Property Name:								
Property Address:								
City:	Parish: State			State:				Zip Code:
Property Owner/Manager:					Phone No. ())
Property Owner/Manager Address	:							
City:			State:					Zip Code:
Number of Units to be abated:			Building Name or Number:					
Square Footage/Acreage to be Aba	ated:							

V. Initie	al Abatement	t Notification: Start Date	e: Complet	tion Date:
Please be	e advised that		e that has a TCLP level greater than o	or equal to 5.0 milligrams of lead per liter must be
VI. Aba	atement Metho	ods:		
Briefly	Describe Aba	patement Methods:		
VII. No	tification Cha	anges: (Complete only if n	notification is an amendment or cance	rellation)
	ded Start	Amended Completion Date:	If amended, provide Initial Notification No.	Change in square footage and/or acreage abated:
TRANS		AND NON-REFUNDABL segory of Abatement	Regular Processing	Emergency Processing
		size: 2000 sq. ft. or less	\$200.00	\$300.00
	Each :	additional 2000 sq. ft.	\$100.00	\$150.00
	Soil aba	atement of 2 acre or less	\$200.00	\$300.00
	Eac	ch additional 2 acre	\$100.00	\$150.00
	Char	anges to Notifications	\$50.00	N/A
(a) I La. I appl pena (b) I also	I hereby certify R.S. 30:2025.Folication, record alties with con I acknowledge	fy that this application, according to the first supplication, according to the first supplication of the first supplicati	illfully or knowingly makes any false oblan, or other document filed or requinal actions as outlined in this regulate provided on or with this form is to be	tion provided is true and accurate in accordance wit statement, representation, or certification in any forn irred to be maintained under this Subtitle are subject t
Sign	nature of Apr	plicant:		Date:
			DEQ Office Use Only	
☐ Inco	complete Dwell nent :	ejected	n Insufficient Abatement Des	Incomplete Applicant Information escription Other
Proces'	sed by: R	2W Other:		