

Proposed Lead Hazard Control Activities	Total Units To Be Completed and Cleared	<div style="border: 1px solid black; width: 50px; height: 20px; background-color: yellow;"></div>
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Activity	Who Will Perform This Activity (Name or Agency/Organization)	Number of Units	Housing Tenure			Estimated Timeline to Complete Work	Estimated Per Unit Cost (\$)
			Owner Occupied	Rental	Vacant		
* Identification, Selection, Prioritization of Units (Referrals)							
* Intake/Enrollment							N/A
* Financing (Grant, Loan, Other)							N/A
* Pre-Hazard Control Blood Lead Testing			N/A	N/A	N/A		
* Paint Inspections/Risk Assessments							
* Laboratory Analysis of Samples			N/A	N/A	N/A		
* Work Specifications			N/A	N/A	N/A		
* Bid Process/Contractor Selection			N/A	N/A	N/A		
* Temporary Relocation					N/A		
* Interim Controls							
* Hazard Abatement							
* Quality Control-Contractor Performance			N/A	N/A	N/A		N/A
* Clearance Evaluations			N/A	N/A	N/A		
* Maintenance Plan-Unit Follow Up			N/A	N/A	N/A		N/A
* Community Outreach/Education		N/A	N/A	N/A	N/A		N/A
* Training		N/A	N/A	N/A	N/A		N/A

Activity:
 *Identification, Selection, Prioritization of Units (Referrals) This should be a higher number than the number of units that are projected to be completed and cleared by the program

Who Will Perform This Activity: Applicant Agency, Partner Organization, Contractor, Grassroots Faith-Based or Community-Based Non-Profit Organization.

Number of Units: Number of units to receive program services.

Housing Tenure: Number of units to receive program services according to housing tenure status (i.e. owner occupied, renter occupied, vacant)

Estimated Time to Complete Work for each unit: Hours, days, weeks required to complete an activity

Estimated Unit Cost: Self explanatory