Lead Clearance Examination Report

For the property at:
1210 W Mineral St
Milwaukee, WI
53204

Conducted on:
02/27/2025
6:30 am
&
03/10/2025
6:30 am



Clearance and report completed by:
Milwaukee Health Department - Lead Risk Assessors

3/19/25

Signature

Date

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee – Health Department
Zeidler Municipal Building | 841 N. Broadway, 1st floor
Milwaukee, WI 53202
414-286-2186
DHS- Lead Company # 20210

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1.0 Findings and description of work performed

This report is the result of a lead clearance examination after renovation/interim controls. Lead clearance examinations are regulated by the Wisconsin Department of Health Services[i] (DHS) under Wis. Admin. Code ch. DHS 163[ii].

2/27/2025—Based on the results of laboratory analysis of dust samples, lead dust hazards were identified in **room 002 boys bathroom floor**. **This project has failed clearance.** The MPS Paint Department was notified of their responsibility to re-clean all failed components and all like components in all un-sampled rooms.

3/10/2025—Based on the results of the visual inspection and laboratory analysis of dust samples, **this project has passed clearance.** Future activities in and around the property may create new lead hazards or cause lead hazards corrected with interim control methods to reappear.

1.1 Abatement activities

No abatement activities were performed.

1.2 Renovation or interim control activities

Interior renovation or interim control work was started on 2/13/2025 and all interior work, including final cleaning, was completed on **2/27/2025**.

Contractor Information:
This was an owner paid project carried out by MPS Paint shop using in-house painters and contracted painters provided by an external company.

The renovation or interim control scope of work included:

Ground Floor:

Room	Substrate	Component	Side	Interim Control
008A	Plaster	North Wall	C	Stabilize- prep & paint
	Plaster	East Wall	D	Stabilize- prep & paint
	Plaster	South Wall	A	Stabilize- prep & paint
	Metal	HVAC Duct (Side B)	B	Stabilize- prep & paint
	Metal	HVAC Duct (Center of room)		Stabilize- prep & paint
Stair 2--G1	Plaster	North Wall (Over door)	C	Stabilize- prep & paint
002A	Wood	Door to 002A Trim	A	Stabilize- prep & paint
	Wood	Door to 002A Jamb	A	Stabilize- prep & paint
	Wood	Door to 002A	A	Stabilize- prep & paint
002	Wood	Double door to 002 Trim	B	Stabilize- prep & paint
	Wood	Double door to 002 Jamb	B	Stabilize- prep & paint
	Wood	Double Door to 002 (left)	B	Stabilize- prep & paint
	Wood	Double door to 002 (right)	B	Stabilize- prep & paint
	Wood	Door to vestibule of 002 (left)	D	Stabilize- prep & paint
	Wood	Door to vestibule of 002 (right)	D	Stabilize- prep & paint
	Metal	Pipe along Wall D	D	Stabilize- prep & paint
007B	Wood	Cabinet Wall C Frame	C	Stabilize- prep & paint
	Wood	Cabinet Wall C Door	C	Stabilize- prep & paint
	Wood	Cabinet Wall C Shelf	C	Stabilize- prep & paint

	Wood	Cabinet Wall A Frame	A	Stabilize- prep & paint
	Wood	Cabinet Wall A Door	A	Stabilize- prep & paint
003	Plaster	West Wall	B	Stabilize- prep & paint
	Plaster	North Wall	C	Stabilize- prep & paint
	Plaster	East Wall	D	Stabilize- prep & paint
006A	Plaster	North Wall	C	Stabilize- prep & paint
	Wood	Door Trim (to 006)	D	Stabilize- prep & paint
	Wood	Door (to 006)	D	Stabilize- prep & paint
009	Wood	Double Door to 009 (right)	D	Stabilize- prep & paint
	Wood	Door to vestibule of 009 (left)	B	Stabilize- prep & paint
	Plaster	Ceiling (sink area)		Stabilize- prep & paint
	Metal	Pipe (center ceiling by sinks)		Stabilize- prep & paint
	Metal	Pipe (along ceiling by windows)	C	Stabilize- prep & paint
	Plaster	West Wall (around pipe over toilets)	B	Stabilize- prep & paint
	Plaster	North Wall (around windows by toilets)	C	Stabilize- prep & paint
	Plaster	East Wall (around pipe over toilets)	D	Stabilize- prep & paint
	Plaster	North Wall (around pipe over sinks)	C	Stabilize- prep & paint

1st Floor:

Room	Substrate	Component	Side	Interim Control
12	Wood	Door	D	Stabilize- prep & paint

3rd Floor:

Room	Substrate	Component	Side	Interim Control
030	Wood	Closet Door	C	Stabilize- prep & paint
	Wood	Closet Door Jamb	C	Stabilize- prep & paint
030C	Wood	Door Jamb	B	Stabilize- prep & paint
	Wood	Door trim	B	Stabilize- prep & paint
032 PASS	Plaster	Wall	C	Stabilize- prep & paint
	Plaster	Wall	B	Stabilize- prep & paint
032A	Wood	Door Trim	A	Stabilize- prep & paint

Dust lead hazard control options

GROUND FLOOR

ALL windowsills and floors on the ground floor - Clean with HEPA vacuum and thoroughly wash hard surfaces (Interim control)

1ST FLOOR

The windows sills in room 010A and 012 and all other like surfaces not sampled throughout the 1st floor - Clean with HEPA vacuum and thoroughly wash hard surfaces (Interim control)

The floor in exit 2 and all other like surfaces not sampled throughout the 1st floor - Clean with HEPA vacuum and thoroughly wash hard surfaces (Interim control)

2ND FLOOR

The windows sills in room 020 and 022, and all other like surfaces not sampled throughout the 2nd floor - Clean with HEPA vacuum and thoroughly wash hard surfaces (Interim control) **The floor in room 026 and all other like surfaces not sampled throughout the 2nd floor -** Clean with HEPA vacuum and thoroughly wash hard surfaces (Interim control)

3RD FLOOR

ALL floors on the 3rd Floor - Clean with HEPA vacuum and thoroughly wash hard surfaces (Interim control)

2.0 Property owner's next actions

☐ **Review the report** and **call the clearance examiner** if you have questions.

☐ **Save a copy of this report for future purchasers of this property.** This report must be disclosed prior to the sale.

2.1 Ongoing monitoring and maintenance

Regular ongoing maintenance and visual inspection of the property should be conducted to identify any areas of new deterioration. This may be done by the property owner, a certified risk assessor or a certified hazard investigator. Close attention should be given to all areas that received interim control measures and enclosed or encapsulated areas. New lead hazards may develop over time. Be sure to document any areas of new deterioration, rot, and substrate or component failure. These conditions should immediately be corrected using approved lead-safe work practices with an ongoing property maintenance program.

2.2 Disclose this report to future purchasers and renters of this property

Provide a copy of this report, along with a copy of the educational pamphlet, Protect Your Family from Lead in Your Home[iii], to potential tenants or purchasers of this property before they become obligated under a sales contract or lease. More information on complying with this federal regulation is available at Lead-Based Paint Disclosure Rule (Section 1018 of Title X).

3.0 Methods

3.1 Visual inspection

Before any testing was done, the property was examined to determine that all work was completed as stated in the scope of work and for the presence of visible dust, debris, and paint.

3.2 Dust analysis

At least one hour elapsed between the final cleaning and collection of dust wipe samples to allow for airborne dust to settle. Single-surface dust wipe samples were collected from windowsills, window troughs and floors following documented protocol and sampling methodologies found in Wisconsin Administrative Code ch. DHS 163 and Appendix 13.1: Wipe Sampling of Settled Dust for Lead Determination[iv], of the HUD Guidelines. The results of dust analyses were used to determine the presence of dust lead hazards. In Wisconsin, to pass clearance, laboratory sample results must show all samples have amounts

of lead dust less than (<) 10 micrograms per square foot (µg/ft²) on floors, <100 µg/ft² on windowsills, <100 µg/ft² in window troughs, and <40 µg/ft² on exterior porch.

4.0 Full results

4.1 Visual inspection of the interior

On 2/27/2025, a visual inspection was conducted in the following areas: **Ground, 1st, 2nd and 3rd floors**. No visible dust, debris, or paint chips were observed on the floors or any horizontal surfaces in the work areas and adjacent to the work areas.

On 3/10/2025, a visual inspection was conducted in the following areas: **Ground, 1st, 2nd and 3rd floors**. No visible dust, debris, or paint chips were observed on the floors or any horizontal surfaces in the work areas and adjacent to the work areas.

4.2 Visual inspection of the exterior

No Exterior work required on this project.

4.3 Dust analysis results

On **2/27/2025**, risk assessor collected **66** single surface wipe samples to find out if lead dust hazards were present on floors and windowsills.

Samples, including **4** generically labeled "field blank" wipes submitted for quality control, were analyzed by the:

City of Milwaukee – Public Health Laboratories
841 North Broadway, Room 205
Milwaukee, WI 53202
414-286-3526
ID# 102186

Wipe sampling summary table

Property address**:** 1210 W. Mineral
Collection date: 2/27/2025
Collection time: 6:00 AM
Date results received: 2/28/2025

Sample	Room equivalent	Surface	Result	Standard	Pass/Fail
Ground Floor					
1	Stage 2-G1	Floor	<5	< 10	Pass
2	**002 Boy's Bath**	**Floor**	**21**	< 10	**Fail**
3	Stair 3-G1	Floor	<5	< 10	Pass
4	007 Pass	Floor	<5	< 10	Pass
5	007B	Floor	<5	< 10	Pass
6	G-1 Corr	Floor	<5	< 10	Pass
7	001 Café	Floor	<5	< 10	Pass
8	008 Classroom	Floor	<5	< 10	Pass
9	008 Classroom	Sill	<45	< 100	Pass
10	Stair 1- G1	Floor	<5	< 10	Pass
11	009 Girls Bath	Floor	<5	< 10	Pass

12	009 Girls Bath	Sill	<45	< 100	Pass
14	007	Sill	<45	< 100	Pass
15	008A	Floor	<5	< 10	Pass
16	008A	Sill	<45	< 100	Pass
17	Blank		<5	<5	Pass
Other surfaces tested					
No standard exists for the following surface (sample size 2x8)					
13	001 Book Case		<45		

1ST FLOOR					
1	Exit 2	Floor	<5	< 10	Pass
2	Exit 2	Sill	<45	< 100	Pass
3	010A	Floor	7.5	< 10	Pass
4	010A	Sill	<45	< 100	Pass
5	012	Floor	<5	< 10	Pass
6	012	Sill	<45	< 100	Pass
8	014	Floor	<5	< 10	Pass
9	014	Sill	<45	< 100	Pass
11	015	Floor	<5	< 10	Pass
12	015	Sill	<45	< 100	Pass
15	Blank		<5	< 5	Pass
Other surfaces tested					
No standard exists for the following surfaces (sample size 12x12)					
7	010A	Bookshelf	<5		
10	014	Toy's table	<5		
13	015	Top of play fridge	<5		
14	011	Top bookshelf	<5		

2nd FLOOR					
1	020	Floor	<5	< 10	Pass
2	020	Sill	<45	< 100	Pass
3	022	Floor	<5	< 10	Pass
4	022	Sill	<45	< 100	Pass
5	026	Floor	<5	< 10	Pass
6	026	Sill	<45	< 100	Pass
7	025	Floor	<5	< 10	Pass
9	024	Floor	<5	< 10	Pass
10	024	Sill	<45	< 100	Pass
11	021	Floor	<5	< 10	Pass
13	023	Floor	<5	< 10	Pass
15	Corr 2-1	Floor	<5	< 10	Pass
17	Satir 2	Sill	<45	< 100	Pass
18	Stair 1	Sill	<45	< 100	Pass
Other surfaces tested					
No standard exists for the following surfaces (sample size 2x8)					
8	025	Shelf	<45		
12	021	Shelf	<45		

14	023	Shelf	<45		

3rd FLOOR					
1	032	Floor	<5	< 10	Pass
2	032	Sill	<45	< 100	Pass
4	033PASS	Floor	<5	< 10	Pass
5	033	Floor	<5	< 10	Pass
6	033	Sill	<45	< 100	Pass
7	032A	Floor	<5	< 10	Pass
8	Stair 3- F5	Floor	<5	< 10	Pass
9	034	Floor	<5	< 10	Pass
10	CORR 3-1	Floor	<5	< 10	Pass
11	035A	Floor	<5	< 10	Pass
12	035	Floor	<5	< 10	Pass
13	035	Sill	<45	< 100	Pass
14	030	Floor	<5	< 10	Pass
15	030	Sill	<45	< 100	Pass
16	Blank		<5	< 5	Pass
Other surfaces tested					
No standard exists for the following surfaces (sample size 2x8)					
3	032	Cabinet	<45		

On **3/10/2025**, a total of 4 dust wipe samples were collected from areas that had **failed clearance** and were analyzed. One field blank sample anonymously marked was included and analyzed as a quality control check.

Wipe sampling summary table

Property address**:** 1210 W. Mineral
Collection date: 3/10/2025
Collection time: 6:00 AM
Date results received: 3/11/2025

Sample	Room equivalent	Surface	Result	Standard	Pass/Fail
Ground Floor					
1	Room 009	Floor	<5	<10	Pass
2	Room 001	Floor	<5	<10	Pass
3	Stairway 1-G1 lower landing	Floor	<5	<10	Pass
4	Stairway 3-G1 lower landing	Floor	<5	<10	Pass
5	Quality Control	Blank	<5	<5	Pass

APPENDIX A: Laboratory Analysis Report(s)

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
841 North Broadway, Room 205 Milwaukee, WI 53202-3653
Phone Number: (414)286-3526 Fax Number: (414)286-5098
Autoreporting Lab

Submitter copy to:

BASE LEAD PROGRAM
841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Order ID : Z0270017
LRN : 0000324913
Auxiliary ID : 56999
Date Collected: 02/27/25
Date Received : 02/27/25

Requested by: [redacted]

FINAL

Patient Name: **CP/W/MINERALST, 1210** DOB: Age: Sex:

Ord. Comm: Base- Clearance- 17 wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
COLLECTED 02/27/25 06:30 RECEIVED 02/27/25 09:11					
Sample 1					
Dust Wipe 1	*<5.0			ug/sq.ft.	02/28/25 10:48
Width	*12.00			in.	02/28/25 10:48
Length	*12.00			in.	02/28/25 10:48
Sample 2					
Dust Wipe 2	*21			ug/sq.ft.	02/28/25 10:48
Width	*12.00			in.	02/28/25 10:48
Length	*12.00			in.	02/28/25 10:48
Sample 3					
Dust Wipe 3	*<5.0			ug/sq.ft.	02/28/25 10:48
Width	*12.00			in.	02/28/25 10:48
Length	*12.00			in.	02/28/25 10:48
Sample 4					
Dust Wipe 4	*<5.0			ug/sq.ft.	02/28/25 10:48
Width	*12.00			in.	02/28/25 10:48
Length	*12.00			in.	02/28/25 10:48
Sample 5					
Dust Wipe 5	*<5.0			ug/sq.ft.	02/28/25 10:48
Width	*12.00			in.	02/28/25 10:48
Length	*12.00			in.	02/28/25 10:48

Legends: L-Low, H-High, AB-Abnormal, P-Panic, C-Critical, X-Extreme

[redacted]
Laboratory Director

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
841 North Broadway, Room 205 Milwaukee, WI 53202-3653
Phone Number: (414)286-3526 Fax Number: (414)286-5098
Autoreporting Lab

Submitter copy to:

BASE LEAD PROGRAM
841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Order ID : Z0270017
LRN : 0000324913
Auxiliary ID : 56999
Date Collected: 02/27/25
Date Received : 02/27/25

Requested by: [redacted]

FINAL

Patient Name: **CP/W/MINERALST, 1210** DOB: Age: Sex:

Ord. Comm: Base- Clearance- 17 wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 6					
Dust Wipe 6	*<5.0			ug/sq.ft.	02/28/25 10:48
Width	*12.00			in.	02/28/25 10:48
Length	*12.00			in.	02/28/25 10:48
Sample 7					
Dust Wipe 7	*<5.0			ug/sq.ft.	02/28/25 10:48
Width	*12.00			in.	02/28/25 10:48
Length	*12.00			in.	02/28/25 10:48
Sample 8					
Dust Wipe 8	*<5.0			ug/sq.ft.	02/28/25 10:48
Width	*12.00			in.	02/28/25 10:48
Length	*12.00			in.	02/28/25 10:48
Sample 9					
Dust Wipe 9	*<45			ug/sq.ft.	02/28/25 10:48
Width	*2.00			in.	02/28/25 10:48
Length	*8.00			in.	02/28/25 10:48
Sample 10					
Dust Wipe 10	*<5.0			ug/sq.ft.	02/28/25 10:48
Width	*12.00			in.	02/28/25 10:48
Length	*12.00			in.	02/28/25 10:48

Legends: L-Low, H-High, AB-Abnormal, P-Panic, C-Critical, X-Extreme

[redacted]
Laboratory Director

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
841 North Broadway, Room 205 Milwaukee, WI 53202-3653
Phone Number: (414)286-3526 Fax Number: (414)286-5098
Autoreporting Lab

Submitter copy to:

BASE LEAD PROGRAM
841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Requested by: [redacted]

Order ID : Z0270017
LRN : 0000324913
Auxiliary ID : 56999
Date Collected: 02/27/25
Date Received : 02/27/25

FINAL

Patient Name: **CP/W/MINERALST, 1210** DOB: Age: Sex:

Ord. Comm: Base- Clearance- 17 wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 11					
Dust Wipe 11	*<5.0			ug/sq.ft.	02/28/25 10:48
Width	*12.00			in.	02/28/25 10:48
Length	*12.00			in.	02/28/25 10:48
Sample 12					
Dust Wipe 12	*<45			ug/sq.ft.	02/28/25 10:48
Width	*2.00			in.	02/28/25 10:48
Length	*8.00			in.	02/28/25 10:48
Sample 13					
Dust Wipe 13	*<45			ug/sq.ft.	02/28/25 10:48
Width	*2.00			in.	02/28/25 10:48
Length	*8.00			in.	02/28/25 10:48
Sample 14					
Dust Wipe 14	*<45			ug/sq.ft.	02/28/25 10:48
Width	*2.00			in.	02/28/25 10:48
Length	*8.00			in.	02/28/25 10:48
Sample 15					
Dust Wipe 15	*<5.0			ug/sq.ft.	02/28/25 10:48
Width	*12.00			in.	02/28/25 10:48
Length	*12.00			in.	02/28/25 10:48

Legends: L-Low, H-High, AB-Abnormal, P-Panic, C-Critical, X-Extreme

[redacted]
Laboratory Director

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
841 North Broadway, Room 205 Milwaukee, WI 53202-3653
Phone Number: (414)286-3526 Fax Number: (414)286-5098
Autoreporting Lab

Submitter copy to:

BASE LEAD PROGRAM
841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Requested by: [redacted]

Order ID : Z0270017
LRN : 0000324913
Auxiliary ID : 56999
Date Collected: 02/27/25
Date Received : 02/27/25

FINAL

Patient Name: **CP/W/MINERALST, 1210** DOB: Age: Sex:

Ord. Comm: Base- Clearance- 17 wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 16					
Dust Wipe 16	*<45			ug/sq.ft.	02/28/25 10:48
Width	*2.00			in.	02/28/25 10:48
Length	*8.00			in.	02/28/25 10:48
Sample 17					
Dust Wipe 17	*<5.0			ug/sq.ft.	02/28/25 10:48
Width	*12.00			in.	02/28/25 10:48
Length	*12.00			in.	02/28/25 10:48
Test Method					
Test Method	*see below				02/27/25 09:20

Sample Preparation: Modified ASTM E1644 per PbSOP
Analytical Method: Modified EPA Method 7000B per PbSOP

Minimum Reporting Limit: 5.0 ug/sqft
Minimum Detection Limit: 2.5 ug/sqft

Sample results have not been corrected for field blank or analytical blank. Results related only to those samples tested. All sample area information is provided to the lab by the client unless otherwise stated.
QC results associated with these samples were acceptable unless otherwise noted.
Data reviewed and approved by the QA Coordinator/Technical Manager.

continued on next page

Legends: L-Low, H-High, AB-Abnormal, P-Panic, C-Critical, X-Extreme

[redacted]
Laboratory Director

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
841 North Broadway, Room 205 Milwaukee, WI 53202-3653
Phone Number: (414)286-3526 Fax Number: (414)286-5098
Autoreporting Lab

Submitter copy to:

BASE LEAD PROGRAM
841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Order ID : Z0270017
LRN : 0000324913
Auxiliary ID : 56999
Date Collected: 02/27/25
Date Received : 02/27/25

Requested by: [redacted]

FINAL

Patient Name: **CP/W/MINERALST, 1210** DOB: Age: Sex:

Ord. Comm: Base- Clearance- 17 wipes

continued

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME

Accrediting body: AIHA-LAP, LLC; Lab ID #102186.

Legends: L-Low, H-High, AB-Abnormal, P-Panic, C-Critical, X-Extreme

[redacted]
Laboratory Director

TAKEN @ 6:30AM

City of Milwaukee Health Department

Lab No. _____

H-3044 Lead Dust Sample Collection and Results

0056999

Date 2/27/25

☐ HUD ☑ Base ☐ CDBG

inspecto [redacted]

	Last Name	First Name	Phone
Owner's Name			
Contractor			

Street No.	Street Name	Apt. No.	City	Zip Code
1210	W. Mineral		Milwaukee	

☐ Prewipe ☑ Clearance ☐ Interim ☐ Re-Wipe

Sample No.	Room Type	Sample Type	Substrate Type	Substrate Condition	Sample Area Meas.	Comments
1	9	A	5	2	12X12	Stair 2-G1
2	7	A	6	2	12X12	002 Boys Bath
3	9	A	5	2	12X12	Stair 3-G1
4	9	A	5	2	12X12	007 pass
5	9	A	5	2	12X12	007B
6	9	A	5	2	12X12	G1 Corr
7	9	A	1	2	12X12	001 cafe
8	9	A	3	2	12X12	008 classroom
9	9	B	4	2	2X8	008 classroom
10	9	A	5	2	12X12	Stair 1-G1
11	7	A	6	2	12X12	009 Girls Bath
12	7	B	6	2	2X8	009 Girls Bath
13	7	B	4	2	2X8	001 cafe
14	9	B	4	2	2X8	007
15	9	A	1	2	12X12	008A
16	9	B	4	2	2X8	008A
17	9	A	5	2	12X12	W>

Z0270017 --> URGENT
CP/W/MINERALST, 1210
Mrn: 0000324913 B#: 0000324913
BASE:: LDUST
Dob:

Codes:

Room Type: 1 = Living Rm. 2 = Ki[illegible] 6 = Family Rm. 7 = Bathroom 8 = Basement 9 = Other

Sample Type: A = Floor B = Interior [illegible] D = Other

Substrate Type: 1 = Vinyl 2 = Carpet 3 = Wood 4 = Painted Surface 5 = Concrete 6 = Other

Substrate Condition: 1 = Deteriorated 2 = Moderate 3 = Excellent

Date Reported 2-28-2025

Analyst [redacted]

H-3044 R2/14 MHD Graphics

White: Requestor Yellow: Lab Pink: Office

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
841 North Broadway, Room 205 Milwaukee, WI 53202-3653
Phone Number: (414)286-3526 Fax Number: (414)286-5098
Autoreporting Lab

Submitter copy to:

BASE LEAD PROGRAM
841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Order ID : Z0270013
LRN : 0000324913
Auxiliary ID : 56998
Date Collected: 02/27/25
Date Received : 02/27/25

Requested by: [redacted]

FINAL

Patient Name: **CP/W/MINERALST, 1210** DOB: Age: Sex:

Ord. Comm: Base- Clearance- 15 wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
COLLECTED 02/27/25 06:00 RECEIVED 02/27/25 09:11					
Sample 1					
Dust Wipe 1	*<5.0			ug/sq.ft.	02/28/25 10:45
Width	*12.00			in.	02/28/25 10:45
Length	*12.00			in.	02/28/25 10:45
Sample 2					
Dust Wipe 2	*<45			ug/sq.ft.	02/28/25 10:45
Width	*2.00			in.	02/28/25 10:45
Length	*8.00			in.	02/28/25 10:45
Sample 3					
Dust Wipe 3	*7.5			ug/sq.ft.	02/28/25 10:45
Width	*12.00			in.	02/28/25 10:45
Length	*12.00			in.	02/28/25 10:45
Sample 4					
Dust Wipe 4	*<45			ug/sq.ft.	02/28/25 10:45
Width	*2.00			in.	02/28/25 10:45
Length	*8.00			in.	02/28/25 10:45
Sample 5					
Dust Wipe 5	*<5.0			ug/sq.ft.	02/28/25 10:45
Width	*12.00			in.	02/28/25 10:45
Length	*12.00			in.	02/28/25 10:45

Legends: L-Low, H-High, AB-Abnormal, P-Panic, C-Critical, X-Extreme

[redacted]
Laboratory Director

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
841 North Broadway, Room 205 Milwaukee, WI 53202-3653
Phone Number: (414)286-3526 Fax Number: (414)286-5098
Autoreporting Lab

Submitter copy to:

BASE LEAD PROGRAM
841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Order ID : Z0270013
LRN : 0000324913
Auxiliary ID : 56998
Date Collected: 02/27/25
Date Received : 02/27/25

Requested by: [redacted]

FINAL

Patient Name: **CP/W/MINERALST, 1210** DOB: Age: Sex:

Ord. Comm: Base- Clearance- 15 wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 6					
Dust Wipe 6	*<45			ug/sq.ft.	02/28/25 10:45
Width	*2.00			in.	02/28/25 10:45
Length	*8.00			in.	02/28/25 10:45
Sample 7					
Dust Wipe 7	*<5.0			ug/sq.ft.	02/28/25 10:45
Width	*12.00			in.	02/28/25 10:45
Length	*12.00			in.	02/28/25 10:45
Sample 8					
Dust Wipe 8	*<5.0			ug/sq.ft.	02/28/25 10:45
Width	*12.00			in.	02/28/25 10:45
Length	*12.00			in.	02/28/25 10:45
Sample 9					
Dust Wipe 9	*<45			ug/sq.ft.	02/28/25 10:45
Width	*2.00			in.	02/28/25 10:45
Length	*8.00			in.	02/28/25 10:45
Sample 10					
Dust Wipe 10	*<5.0			ug/sq.ft.	02/28/25 10:45
Width	*12.00			in.	02/28/25 10:45
Length	*12.00			in.	02/28/25 10:45

Legends: L-Low, H-High, AB-Abnormal, P-Panic, C-Critical, X-Extreme

[redacted]
Laboratory Director

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
841 North Broadway, Room 205 Milwaukee, WI 53202-3653
Phone Number: (414)286-3526 Fax Number: (414)286-5098
Autoreporting Lab

Submitter copy to:

BASE LEAD PROGRAM
841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Requested by: [redacted]

Order ID : Z0270013
LRN : 0000324913
Auxiliary ID : 56998
Date Collected: 02/27/25
Date Received : 02/27/25

FINAL

Patient Name: **CP/W/MINERALST, 1210** DOB: Age: Sex:

Ord. Comm: Base- Clearance- 15 wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 11					
Dust Wipe 11	*<5.0			ug/sq.ft.	02/28/25 10:45
Width	*12.00			in.	02/28/25 10:45
Length	*12.00			in.	02/28/25 10:45
Sample 12					
Dust Wipe 12	*<45			ug/sq.ft.	02/28/25 10:45
Width	*2.00			in.	02/28/25 10:45
Length	*8.00			in.	02/28/25 10:45
Sample 13					
Dust Wipe 13	*<5.0			ug/sq.ft.	02/28/25 10:45
Width	*12.00			in.	02/28/25 10:45
Length	*12.00			in.	02/28/25 10:45
Sample 14					
Dust Wipe 14	*<5.0			ug/sq.ft.	02/28/25 10:45
Width	*12.00			in.	02/28/25 10:45
Length	*12.00			in.	02/28/25 10:45
Sample 15					
Dust Wipe 15	*<5.0			ug/sq.ft.	02/28/25 10:45
Width	*12.00			in.	02/28/25 10:45
Length	*12.00			in.	02/28/25 10:45

Legends: L-Low, H-High, AB-Abnormal, P-Panic, C-Critical, X-Extreme

[redacted]
Laboratory Director

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
841 North Broadway, Room 205 Milwaukee, WI 53202-3653
Phone Number: (414)286-3526 Fax Number: (414)286-5098
Autoreporting Lab

Submitter copy to:

BASE LEAD PROGRAM
841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Requested by: [redacted]

Order ID : Z0270013
LRN : 0000324913
Auxiliary ID : 56998
Date Collected: 02/27/25
Date Received : 02/27/25

FINAL

Patient Name: **CP/W/MINERALST, 1210** DOB: Age: Sex:

Ord. Comm: Base- Clearance- 15 wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME

Test Method

Test Method *see below 02/27/25 09:18

Sample Preparation: Modified ASTM E1644 per PbSOP
Analytical Method: Modified EPA Method 7000B per PbSOP

Minimum Reporting Limit: 5.0 ug/sqft
Minimum Detection Limit: 2.5 ug/sqft

Sample results have not been corrected for field blank or analytical blank. Results related only to those samples tested. All sample area information is provided to the lab by the client unless otherwise stated.
QC results associated with these samples were acceptable unless otherwise noted.
Data reviewed and approved by the QA Coordinator/Technical Manager.
Accrediting body: AIHA-LAP, LLC; Lab ID #102186.

Legends: L-Low, H-High, AB-Abnormal, P-Panic, C-Critical, X-Extreme

[redacted]
Laboratory Director

City of Milwaukee Health Department

0056998

Lab No. _____

H-3044 Lead Dust Sample Collection and Results

Date 2/27/25

inspecto [redacted]

☐ HUD ☒ Base ☐ CDBG

	Last Name	First Name	Phone
Owner's Name			
Contractor			

Street No.	Street Name	Apt. No.	City	Zip Code
1210	W. Mineral St.		Milwaukee	

☐ Prewipe ☒ Clearance ☐ Interim ☐ Re-Wipe

Sample No.	Room Type	Sample Type	Substrate Type	Substrate Condition	Sample Area Meas.	Comments
1	9	A	3	2	12x12	Exit 2 Floor
2	9	B	3	2	2x8	Exit 2 Sill
3	9	A	3	2	12x12	Room 10 A Floor
4	9	B	3	2	2x8	Room 10 A sill
5	9	A	3	2	12x12	Room 12 Floor
6	9	B	3	2	2x8	Room 12 Sill
7	9	D	3	2	12x12	Room 10 A book shelf
8	9	A	3	2	12x12	Room 14 Floor
9	9	B	3	2	2x8	Room 14 sill
10	9	D	3	2	12x12	Room 14 table w/toys
11	9	A	3	2	12x12	Room 15 Floor
12	9	B	3	2	2x8	Room 15 sill
13	9	D	3	2	12x12	Room 15 on top of play fridge
14	9	D	3	2	12x12	Room 11 on top of book shelf
15	9	A	5	2	12x12	1FO Pool

Z0270013 --> URGENT
CP/W/MINERALST, 1210
Mrn:0000324913 B#: 0000324913
BASE:: LDUST Dob:



Codes:

Room Type: 1 = Living Rm. 2 = Kitchen 3 = Dining Rm. 4 = Entry Hall 5 = Bedroom 6 = Family Rm. 7 = Bathroom 8 = Basement 9 = Other

Sample Type: A = Floor B = Interior Sill C = Exterior Sill D = Other

Substrate Type: 1 = Vinyl 2 = Carpet 3 = Wood 4 = Painted Surface 5 = Concrete 6 = Other

Substrate Condition: 1 = Deteriorated 2 = Moderate 3 = Excellent

taken @ 6am

Date Reported 2-28-2025

Analyst [redacted]

H-3044 R2/14 MHD Graphics

White: Requestor Yellow: Lab Pink: Office

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
841 North Broadway, Room 205 Milwaukee, WI 53202-3653
Phone Number: (414)286-3526 Fax Number: (414)286-5098
Autoreporting Lab

Submitter copy to:

BASE LEAD PROGRAM
841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Order ID : Z0270012
LRN : 0000324913
Auxiliary ID : 56997
Date Collected: 02/27/25
Date Received : 02/27/25

Requested by: [redacted]

FINAL

Patient Name: **CP/W/MINERALST, 1210** DOB: Age: Sex:

Ord. Comm: Base- Clearance- 18 wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
COLLECTED 02/27/25 06:09 RECEIVED 02/27/25 09:11					
Sample 1					
Dust Wipe 1	*<5.0			ug/sq.ft.	02/27/25 16:03
Width	*12.00			in.	02/27/25 16:03
Length	*12.00			in.	02/27/25 16:03
Sample 2					
Dust Wipe 2	*<45			ug/sq.ft.	02/27/25 16:03
Width	*2.00			in.	02/27/25 16:03
Length	*8.00			in.	02/27/25 16:03
Sample 3					
Dust Wipe 3	*<5.0			ug/sq.ft.	02/27/25 16:03
Width	*12.00			in.	02/27/25 16:03
Length	*12.00			in.	02/27/25 16:03
Sample 4					
Dust Wipe 4	*<45			ug/sq.ft.	02/27/25 16:03
Width	*2.00			in.	02/27/25 16:03
Length	*8.00			in.	02/27/25 16:03
Sample 5					
Dust Wipe 5	*<5.0			ug/sq.ft.	02/27/25 16:03
Width	*12.00			in.	02/27/25 16:03
Length	*12.00			in.	02/27/25 16:03

Legends: L-Low, H-High, AB-Abnormal, P-Panic, C-Critical, X-Extreme

[redacted]
Laboratory Director

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
841 North Broadway, Room 205 Milwaukee, WI 53202-3653
Phone Number: (414)286-3526 Fax Number: (414)286-5098
Autoreporting Lab

Submitter copy to:

BASE LEAD PROGRAM
841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Order ID : Z0270012
LRN : 0000324913
Auxiliary ID : 56997
Date Collected: 02/27/25
Date Received : 02/27/25

Requested by: [redacted]

FINAL

Patient Name: **CP/W/MINERALST, 1210** DOB: Age: Sex:

Ord. Comm: Base- Clearance- 18 wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 6					
Dust Wipe 6	*<45			ug/sq.ft.	02/27/25 16:03
Width	*2.00			in.	02/27/25 16:03
Length	*8.00			in.	02/27/25 16:03
Sample 7					
Dust Wipe 7	*<5.0			ug/sq.ft.	02/27/25 16:03
Width	*12.00			in.	02/27/25 16:03
Length	*12.00			in.	02/27/25 16:03
Sample 8					
Dust Wipe 8	*<45			ug/sq.ft.	02/27/25 16:03
Width	*2.00			in.	02/27/25 16:03
Length	*8.00			in.	02/27/25 16:03
Sample 9					
Dust Wipe 9	*<5.0			ug/sq.ft.	02/27/25 16:03
Width	*12.00			in.	02/27/25 16:03
Length	*12.00			in.	02/27/25 16:03
Sample 10					
Dust Wipe 10	*<45			ug/sq.ft.	02/27/25 16:03
Width	*2.00			in.	02/27/25 16:03
Length	*8.00			in.	02/27/25 16:03

Legends: L-Low, H-High, AB-Abnormal, P-Panic, C-Critical, X-Extreme

[redacted]
Laboratory Director

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
841 North Broadway, Room 205 Milwaukee, WI 53202-3653
Phone Number: (414)286-3526 Fax Number: (414)286-5098
Autoreporting Lab

Submitter copy to:

BASE LEAD PROGRAM
841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Order ID : Z0270012
LRN : 0000324913
Auxiliary ID : 56997
Date Collected: 02/27/25
Date Received : 02/27/25

Requested by: [redacted]

FINAL

Patient Name: **CP/W/MINERALST, 1210** DOB: Age: Sex:

Ord. Comm: Base- Clearance- 18 wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 11					
Dust Wipe 11	*<5.0			ug/sq.ft.	02/27/25 16:03
Width	*12.00			in.	02/27/25 16:03
Length	*12.00			in.	02/27/25 16:03
Sample 12					
Dust Wipe 12	*<45			ug/sq.ft.	02/27/25 16:03
Width	*2.00			in.	02/27/25 16:03
Length	*8.00			in.	02/27/25 16:03
Sample 13					
Dust Wipe 13	*<5.0			ug/sq.ft.	02/27/25 16:03
Width	*12.00			in.	02/27/25 16:03
Length	*12.00			in.	02/27/25 16:03
Sample 14					
Dust Wipe 14	*<45			ug/sq.ft.	02/27/25 16:03
Width	*2.00			in.	02/27/25 16:03
Length	*8.00			in.	02/27/25 16:03
Sample 15					
Dust Wipe 15	*<5.0			ug/sq.ft.	02/27/25 16:03
Width	*12.00			in.	02/27/25 16:03
Length	*12.00			in.	02/27/25 16:03

Legends: L-Low, H-High, AB-Abnormal, P-Panic, C-Critical, X-Extreme

[redacted]
Laboratory Director

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
841 North Broadway, Room 205 Milwaukee, WI 53202-3653
Phone Number: (414)286-3526 Fax Number: (414)286-5098
Autoreporting Lab

Submitter copy to:

BASE LEAD PROGRAM
841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Order ID : Z0270012
LRN : 0000324913
Auxiliary ID : 56997
Date Collected: 02/27/25
Date Received : 02/27/25

Requested by: [redacted]

FINAL

Patient Name: **CP/W/MINERALST, 1210** DOB: Age: Sex:

Ord. Comm: Base- Clearance- 18 wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 16					
Dust Wipe 16	*<5.0			ug/sq.ft.	02/27/25 16:03
Width	*12.00			in.	02/27/25 16:03
Length	*12.00			in.	02/27/25 16:03
Sample 17					
Dust Wipe 17	*<45			ug/sq.ft.	02/27/25 16:03
Width	*2.00			in.	02/27/25 16:03
Length	*8.00			in.	02/27/25 16:03
Sample 18					
Dust Wipe 18	*<45			ug/sq.ft.	02/27/25 16:03
Width	*2.00			in.	02/27/25 16:03
Length	*8.00			in.	02/27/25 16:03

Legends: L-Low, H-High, AB-Abnormal, P-Panic, C-Critical, X-Extreme

[redacted]
Laboratory Director

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
841 North Broadway, Room 205 Milwaukee, WI 53202-3653
Phone Number: (414)286-3526 Fax Number: (414)286-5098
Autoreporting Lab

Submitter copy to:

BASE LEAD PROGRAM
841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Order ID : Z0270012
LRN : 0000324913
Auxiliary ID : 56997
Date Collected: 02/27/25
Date Received : 02/27/25

Requested by: [redacted]

FINAL

Patient Name: **CP/W/MINERALST, 1210** DOB: Age: Sex:

Ord. Comm: Base- Clearance- 18 wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Test Method					
Test Method	*see below				02/27/25 09:15

Sample Preparation: Modified ASTM E1644 per PbSOP
Analytical Method: Modified EPA Method 7000B per PbSOP

Minimum Reporting Limit: 5.0 ug/sqft
Minimum Detection Limit: 2.5 ug/sqft

Sample results have not been corrected for field blank or analytical blank. Results related only to those samples tested. All sample area information is provided to the lab by the client unless otherwise stated.
QC results associated with these samples were acceptable unless otherwise noted.
Data reviewed and approved by the QA Coordinator/Technical Manager.
Accrediting body: AIHA-LAP, LLC; Lab ID #102186.

Legends: L-Low, H-High, AB-Abnormal, P-Panic, C-Critical, X-Extreme

[redacted]
Laboratory Director

City of Milwaukee Health Department

0056997

Lab No. _____

H-3044 Lead Dust Sample Collection and Results

Date 2/27/25

inspector [redacted]

☐ HUD ☒ Base ☐ CDBG

	Last Name	First Name	Phone
Owner's Name			
Contractor			

Street No.	Street Name	Apt. No.	City	Zip Code
1210	W Mineral St.		(2nd Floor)	

☐ Prewipe ☒ Clearance ☐ Interim ☐ Re-Wipe

Sample No.	Room Type	Sample Type	Substrate Type	Substrate Condition	Sample Area Meas.	Comments
1	9	A	3	2	12x12	20 Floor
2	9	B	4	2	2x8	20 windowsill
3	9	A	3	2	12x12	22 Floor
4	9	B	4	2	2x8	22 windowsill
5	9	A	3	2	12x12	26 Floor
6	9	B	4	2	2x8	26 windowsill
7	9	A	3	2	12x12	25 Floor
8	9	B	3	2	2x8	25 shelf
9	9	A	3	2	12x12	24 Floor under desk
10	9	B	3	2	2x8	24 window sill
11	9	A	4	2	12x12	21 Floor
12	9	B	3	2	2x8	21 shelf
13	9	A	3	2	12x12	~~22 Floor~~ 23 Floor
14	9	B	3	2	2x8	~~22 Shelf~~ 23 shelf
15	9	A	3	2	12x12	Corr 2-1 Floor
16	9	A	3	2	12x12	Family Room Floor
17	9	B	4	2	2x8	Stair 2 windowsill
18	9	B	4	2	2x8	Stair 1 windowsill

Z0270012 --> URGENT
CP/W/MINERALST, 1210
Mrn: 0000324913 B#: 0000324913
BASE:: LDUST Dob:

Codes:

Room Type: 1 = Living Rm. 2 = Kitc 6 = Family Rm. 7 = Bathroom 8 = Basement 9 = Other

Sample Type: A = Floor B = Interior S

Substrate Type: 1 = Vinyl 2 = Carpet 3 . = Other

Substrate Condition: 1 = Deteriorated 2 = Moderate 3 = Excellent

Date Reported 2-27-2025

Analyst [redacted]

White: Requestor Yellow: Lab Pink: Office

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
841 North Broadway, Room 205 Milwaukee, WI 53202-3653
Phone Number: (414)286-3526 Fax Number: (414)286-5098
Autoreporting Lab

Submitter copy to:

BASE LEAD PROGRAM
841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Order ID : Z0270004
LRN : 0000324913
Auxiliary ID : 56996
Date Collected: 02/27/25
Date Received : 02/27/25

Requested by: [redacted]

FINAL

Patient Name: **CP/W/MINERALST, 1210** DOB: Age: Sex:

Ord. Comm: Base- Clearance- 16 wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
COLLECTED 02/27/25 06:09 RECEIVED 02/27/25 09:11					
Sample 1					
Dust Wipe 1	*<5.0			ug/sq.ft.	02/27/25 16:00
Width	*12.00			in.	02/27/25 16:00
Length	*12.00			in.	02/27/25 16:00
Sample 2					
Dust Wipe 2	*<45			ug/sq.ft.	02/27/25 16:00
Width	*2.00			in.	02/27/25 16:00
Length	*8.00			in.	02/27/25 16:00
Sample 3					
Dust Wipe 3	*<45			ug/sq.ft.	02/27/25 16:00
Width	*2.00			in.	02/27/25 16:00
Length	*8.00			in.	02/27/25 16:00
Sample 4					
Dust Wipe 4	*<5.0			ug/sq.ft.	02/27/25 16:00
Width	*12.00			in.	02/27/25 16:00
Length	*12.00			in.	02/27/25 16:00
Sample 5					
Dust Wipe 5	*<5.0			ug/sq.ft.	02/27/25 16:00
Width	*12.00			in.	02/27/25 16:00
Length	*12.00			in.	02/27/25 16:00

Legends: L-Low, H-High, AB-Abnormal, P-Panic, C-Critical, X-Extreme

[redacted]
Laboratory Director

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
841 North Broadway, Room 205 Milwaukee, WI 53202-3653
Phone Number: (414)286-3526 Fax Number: (414)286-5098
Autoreporting Lab

Submitter copy to:

BASE LEAD PROGRAM
841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Requested by: [redacted]

Order ID : Z0270004
LRN : 0000324913
Auxiliary ID : 56996
Date Collected: 02/27/25
Date Received : 02/27/25

FINAL

Patient Name: **CP/W/MINERALST, 1210** DOB: Age: Sex:

Ord. Comm: Base- Clearance- 16 wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 6					
Dust Wipe 6	*<45			ug/sq.ft.	02/27/25 16:00
Width	*2.00			in.	02/27/25 16:00
Length	*8.00			in.	02/27/25 16:00
Sample 7					
Dust Wipe 7	*<5.0			ug/sq.ft.	02/27/25 16:00
Width	*12.00			in.	02/27/25 16:00
Length	*12.00			in.	02/27/25 16:00
Sample 8					
Dust Wipe 8	*<5.0			ug/sq.ft.	02/27/25 16:00
Width	*12.00			in.	02/27/25 16:00
Length	*12.00			in.	02/27/25 16:00
Sample 9					
Dust Wipe 9	*<5.0			ug/sq.ft.	02/27/25 16:00
Width	*12.00			in.	02/27/25 16:00
Length	*12.00			in.	02/27/25 16:00
Sample 10					
Dust Wipe 10	*<5.0			ug/sq.ft.	02/27/25 16:00
Width	*12.00			in.	02/27/25 16:00
Length	*12.00			in.	02/27/25 16:00

Legends: L-Low, H-High, AB-Abnormal, P-Panic, C-Critical, X-Extreme

[redacted]
Laboratory Director

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
841 North Broadway, Room 205 Milwaukee, WI 53202-3653
Phone Number: (414)286-3526 Fax Number: (414)286-5098
Autoreporting Lab

Submitter copy to:

BASE LEAD PROGRAM
841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Order ID : Z0270004
LRN : 0000324913
Auxiliary ID : 56996
Date Collected: 02/27/25
Date Received : 02/27/25

Requested by: [redacted]

FINAL

Patient Name: **CP/W/MINERALST, 1210** DOB: Age: Sex:

Ord. Comm: Base- Clearance- 16 wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 11					
Dust Wipe 11	*<5.0			ug/sq.ft.	02/27/25 16:00
Width	*12.00			in.	02/27/25 16:00
Length	*12.00			in.	02/27/25 16:00
Sample 12					
Dust Wipe 12	*<5.0			ug/sq.ft.	02/27/25 16:00
Width	*12.00			in.	02/27/25 16:00
Length	*12.00			in.	02/27/25 16:00
Sample 13					
Dust Wipe 13	*<45			ug/sq.ft.	02/27/25 16:00
Width	*2.00			in.	02/27/25 16:00
Length	*8.00			in.	02/27/25 16:00
Sample 14					
Dust Wipe 14	*<5.0			ug/sq.ft.	02/27/25 16:00
Width	*12.00			in.	02/27/25 16:00
Length	*12.00			in.	02/27/25 16:00
Sample 15					
Dust Wipe 15	*<45			ug/sq.ft.	02/27/25 16:00
Width	*2.00			in.	02/27/25 16:00
Length	*8.00			in.	02/27/25 16:00

Legends: L-Low, H-High, AB-Abnormal, P-Panic, C-Critical, X-Extreme

[redacted]
Laboratory Director

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
841 North Broadway, Room 205 Milwaukee, WI 53202-3653
Phone Number: (414)286-3526 Fax Number: (414)286-5098
Autoreporting Lab

Submitter copy to:

BASE LEAD PROGRAM
841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Requested by: [redacted]

Order ID : Z0270004
LRN : 0000324913
Auxiliary ID : 56996
Date Collected: 02/27/25
Date Received : 02/27/25

FINAL

Patient Name: **CP/W/MINERALST, 1210** DOB: Age: Sex:

Ord. Comm: Base- Clearance- 16 wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 16					
Dust Wipe 16	*<5.0			ug/sq.ft.	02/27/25 16:00
Width	*12.00			in.	02/27/25 16:00
Length	*12.00			in.	02/27/25 16:00
Test Method					
Test Method	*see below				02/27/25 09:13

Sample Preparation: Modified ASTM E1644 per PbSOP
Analytical Method: Modified EPA Method 7000B per PbSOP

Minimum Reporting Limit: 5.0 ug/sqft
Minimum Detection Limit: 2.5 ug/sqft

Sample results have not been corrected for field blank or analytical blank. Results related only to those samples tested. All sample area information is provided to the lab by the client unless otherwise stated.
QC results associated with these samples were acceptable unless otherwise noted.
Data reviewed and approved by the QA Coordinator/Technical Manager.
Accrediting body: AIHA-LAP, LLC; Lab ID #102186.

Legends: L-Low, H-High, AB-Abnormal, P-Panic, C-Critical, X-Extreme

[redacted]
Laboratory Director

City of Milwaukee Health Department

0056996

Lab No. _____

H-3044 Lead Dust Sample Collection and Results

Date 2/27/25

☐ HUD ☒ Base ☐ CDBG

inspector [redacted]

	Last Name	First Name	Phone
Owner's Name			
Contractor			

Street No.	Street Name	Apt. No.	City	Zip Code
1210	W Mineral St			

☐ Prewipe ☒ Clearance ☐ Interim ☐ Re-Wipe

Sample No.	Room Type	Sample Type	Substrate Type	Substrate Condition	Sample Area Meas.	Comments
1	9	A	3	2	12x12	032 floor
2	9	B	3	3	2x8	032 Sill
3	9	D	6	3	2x8	032 cabinet.
4	9	A	3	2	12x12	033 Pass floor
5	9	A	3	2	12x12	033 Floor
6	9	B	3	3	2x8	033 Sill
7	9	A	3	2	12x12	032 Floor
8	9	A	3	2	12x12	Stair 3 - FS.
9	9	A	3	2	12x12	034 Floor
10	9	A	3	2	12x12	CORR 3-1 Floor D
11	9	A	3	2	12x12	035 A Floor.
12	9	A	3	2	12x12	035 Floor
13	9	B	3	2	2x8	035 Sill
14	9	A	3	2	12x12	030 Floor
15	9	B	3	2	2x8	030 Sill
16	9	A	3	2	12x12	Den floor

Z0270004 --> URGENT
CP/W/MINERALST, 1210
Mrn:0000324913 B#: 0000324913
BASE:
LDUST
Dob:

Codes:

Room Type: 1 = Living Rm. 2 = Kitchen 3 = Dining Rm. 4 = Entry Hall 5 = Bedroom 6 = Family Rm. 7 = Bathroom 8 = Basement 9 = Other

Sample Type: A = Floor B = Interior Sill C = Exterior Sill D = Other

Substrate Type: 1 = Vinyl 2 = Carpet 3 = Wood 4 = Painted Surface 5 = Concrete 6 = Other

Substrate Condition: 1 = Deteriorated 2 = Moderate 3 = Excellent

Time taken @ 6:09 am

Date Reported 2-27-2025

Analyst [redacted]

H-3044 R2/14 MHD Graphics

White: Requestor **Yellow:** Lab **Pink:** Office

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
841 North Broadway, Room 205 Milwaukee, WI 53202-3653
Phone Number: (414)286-3526 Fax Number: (414)286-5098
Autoreporting Lab

Submitter copy to:

BASE LEAD PROGRAM
841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Order ID : Z1100003
LRN : 0000324913
Auxiliary ID : 54627
Date Collected: 03/10/25
Date Received : 03/10/25

Requested by: [redacted]

FINAL

Patient Name: **CP/W/MINERALST, 1210** DOB: Age: Sex:

Ord. Comm: Base- clearance- 5 wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
COLLECTED 03/10/25 06:00 RECEIVED 03/10/25 08:36					
Sample 1					
Dust Wipe 1	*<5.0			ug/sq.ft.	03/10/25 16:24
Width	*12.00			in.	03/10/25 16:24
Length	*12.00			in.	03/10/25 16:24
Sample 2					
Dust Wipe 2	*<5.0			ug/sq.ft.	03/10/25 16:24
Width	*12.00			in.	03/10/25 16:24
Length	*12.00			in.	03/10/25 16:24
Sample 3					
Dust Wipe 3	*<5.0			ug/sq.ft.	03/10/25 16:24
Width	*12.00			in.	03/10/25 16:24
Length	*12.00			in.	03/10/25 16:24
Sample 4					
Dust Wipe 4	*<5.0			ug/sq.ft.	03/10/25 16:24
Width	*12.00			in.	03/10/25 16:24
Length	*12.00			in.	03/10/25 16:24
Sample 5					
Dust Wipe 5	*<5.0			ug/sq.ft.	03/10/25 16:24
Width	*12.00			in.	03/10/25 16:24
Length	*12.00			in.	03/10/25 16:24

Legends: L-Low, H-High, AB-Abnormal, P-Panic, C-Critical, X-Extreme

[redacted]
Laboratory Director

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
841 North Broadway, Room 205 Milwaukee, WI 53202-3653
Phone Number: (414)286-3526 Fax Number: (414)286-5098
Autoreporting Lab

Submitter copy to:

BASE LEAD PROGRAM
841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Requested by: [redacted]

Order ID : Z1100003
LRN : 0000324913
Auxiliary ID : 54627
Date Collected: 03/10/25
Date Received : 03/10/25

FINAL

Patient Name: **CP/W/MINERALST, 1210** DOB: Age: Sex:

Ord. Comm: Base- clearance- 5 wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME

Test Method

Test Method *see below 03/10/25 08:40

Sample Preparation: Modified ASTM E1644 per PbSOP
Analytical Method: Modified EPA Method 7000B per PbSOP

Minimum Reporting Limit: 5.0 ug/sqft
Minimum Detection Limit: 2.5 ug/sqft

Sample results have not been corrected for field blank or analytical blank. Results related only to those samples tested. All sample area information is provided to the lab by the client unless otherwise stated.
QC results associated with these samples were acceptable unless otherwise noted.
Data reviewed and approved by the QA Coordinator/Technical Manager.
Accrediting body: AIHA-LAP, LLC; Lab ID #102186.

Legends: L-Low, H-High, AB-Abnormal, P-Panic, C-Critical, X-Extreme

[redacted]
Laboratory Director

City of Milwaukee Health Department

TAKEN @ 6AM

0054627

H-3044 Lead Dust Sample Collection and Results

Lab No. _____

Date 3/10/25

inspecto [redacted]

☐ HUD ☑ Base ☐ CDBG

	Last Name	First Name	Phone
Owner's Name			
Contractor			

Street No.	Street Name	Apt. No.	City	Zip Code
1210	W. Mineral		milwaukee	

☐ Prewipe ☑ Clearance ☐ Interim ☐ Re-Wipe

Sample No.	Room Type	Sample Type	Substrate Type	Substrate Condition	Sample Area Meas.	Comments
1	7	A	6	2	12X12	009 Girls bath
2	9	A	5	2	12X12	001
3	9	A	5	2	12X12	Stairway 1-G1 Lower
4	9	A	5	2	12X12	Stairway 3-G1 Lower
5	9	A	5	2	12X12	WZ

CP/W/MINERALST, 1210
Z1100003
BASE:: URGE 03/10/25 06:00
ECH2/E/IH
LDUST
Collection
Z1100003
LDUST 03/10/25 0000324913

Codes:

Room Type: 1 = Living Rm. 2 = Kitchen 3 = Dining Rm. 4 = Entry Hall 5 = Bedroom 6 = Family Rm. 7 = Bathroom 8 = Basement 9 = Other

Sample Type: A = Floor B = Interior Sill C = Exterior Sill D = Other

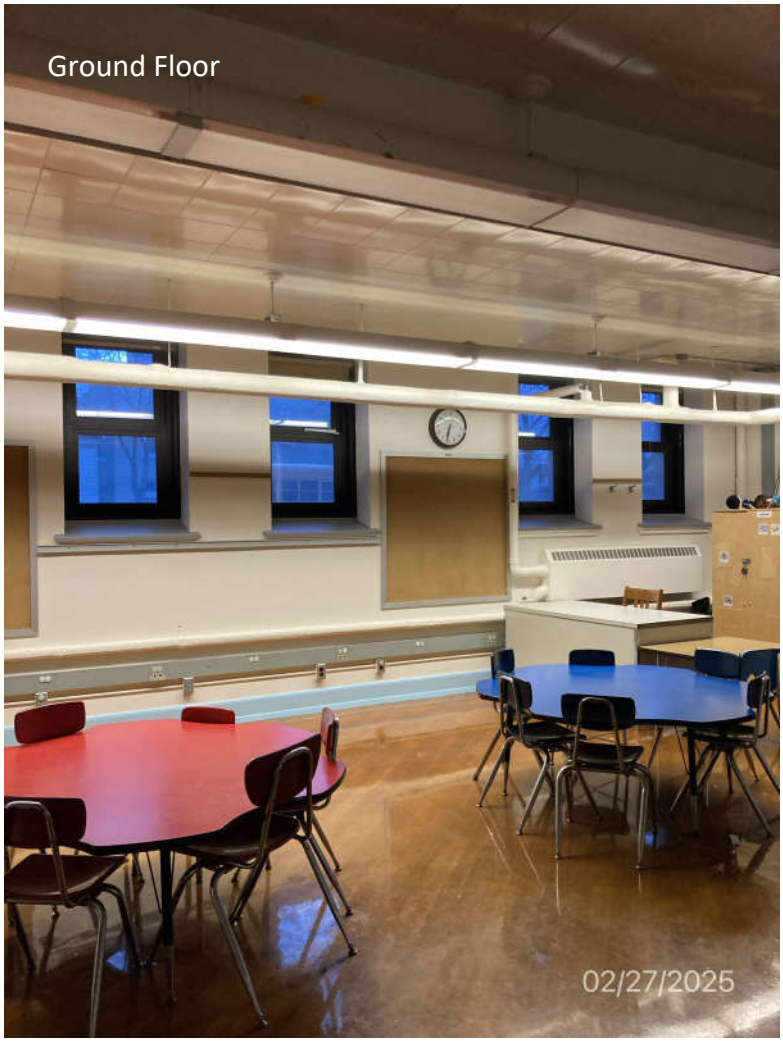
Substrate Type: 1 = Vinyl 2 = Carpet 3 = Wood 4 = Painted Surface 5 = Concrete 6 = Other

Substrate Condition: 1 = Deteriorated 2 = Moderate 3 = Excellent

Date Reported 3-10-2025

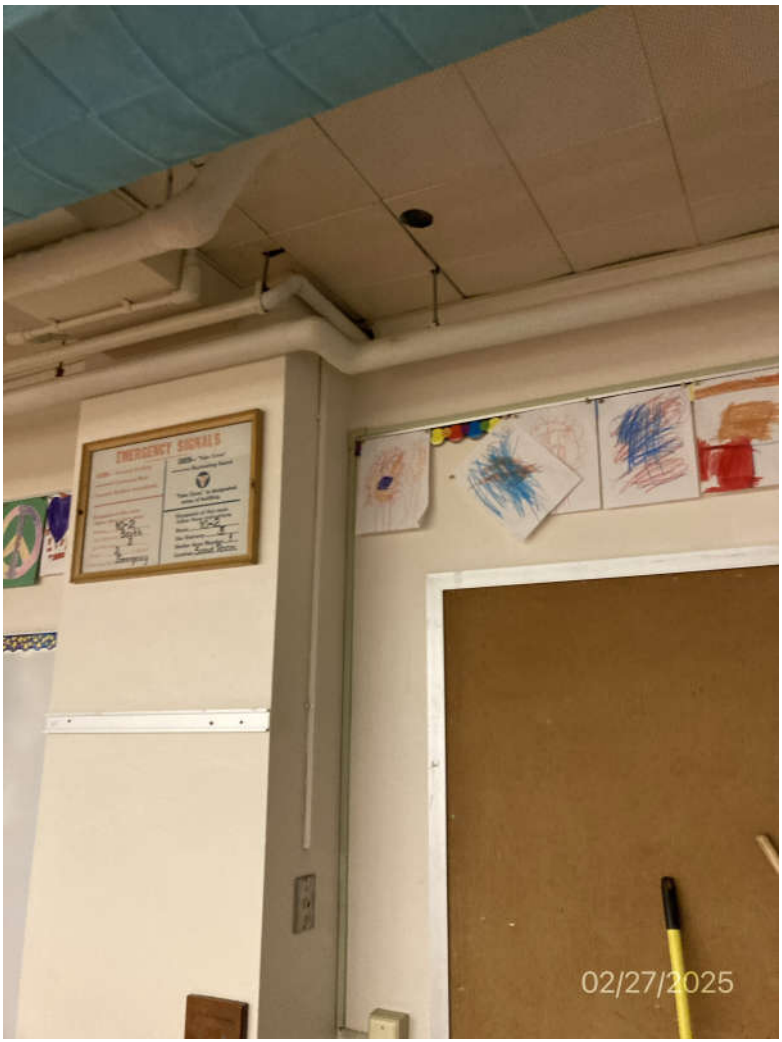
Analyst [redacted]

APPENDIX C: Pictures


Ground Floor
02/27/2025


02/27/2025


02/27/2025

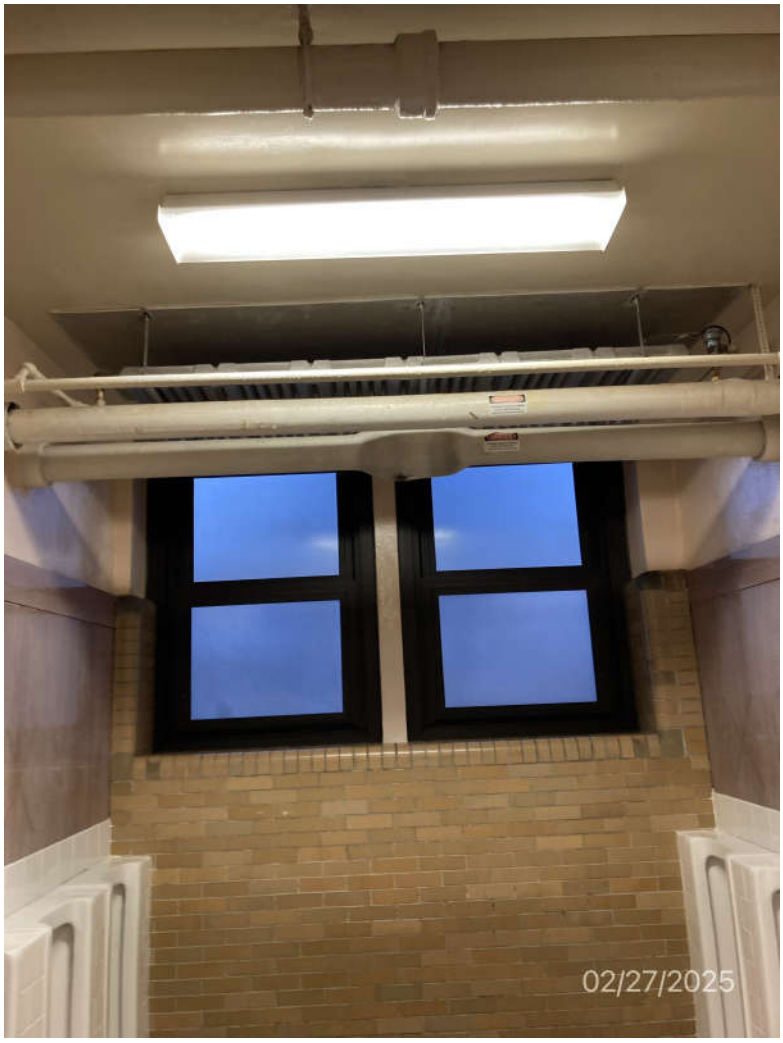

EMERGENCY SIGNALS
02/27/2025

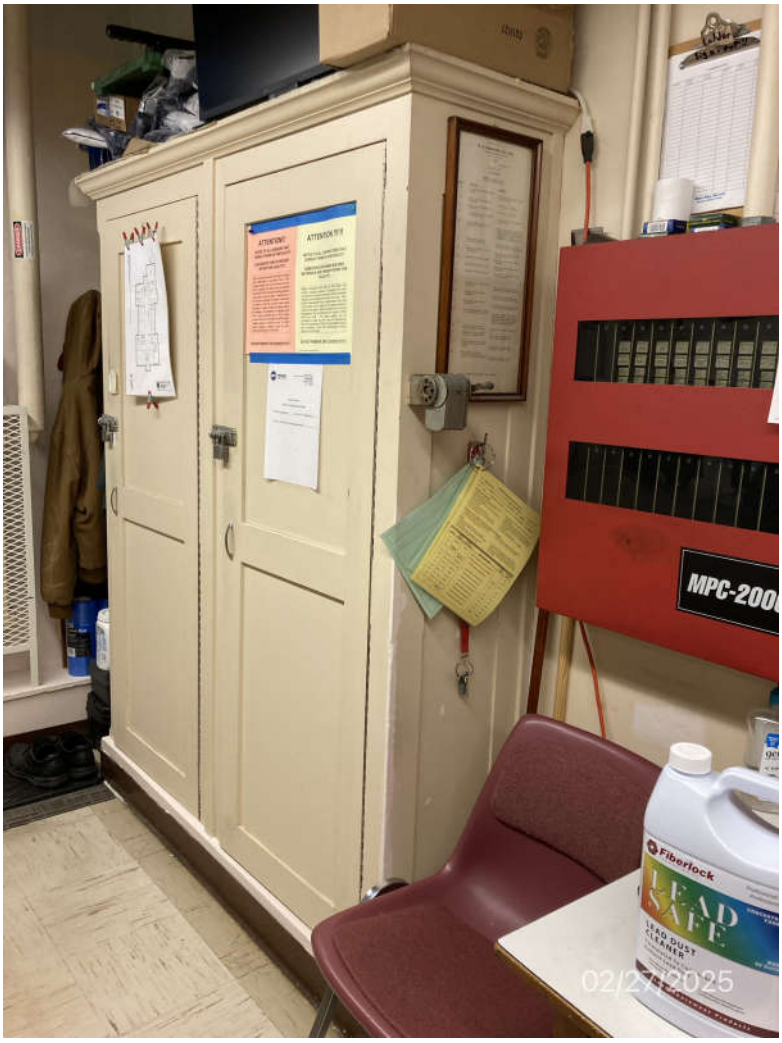

EXIT
WATCH YOUR STEP
WATCH YOUR STEP
EXIT
EXIT
02/27/2025

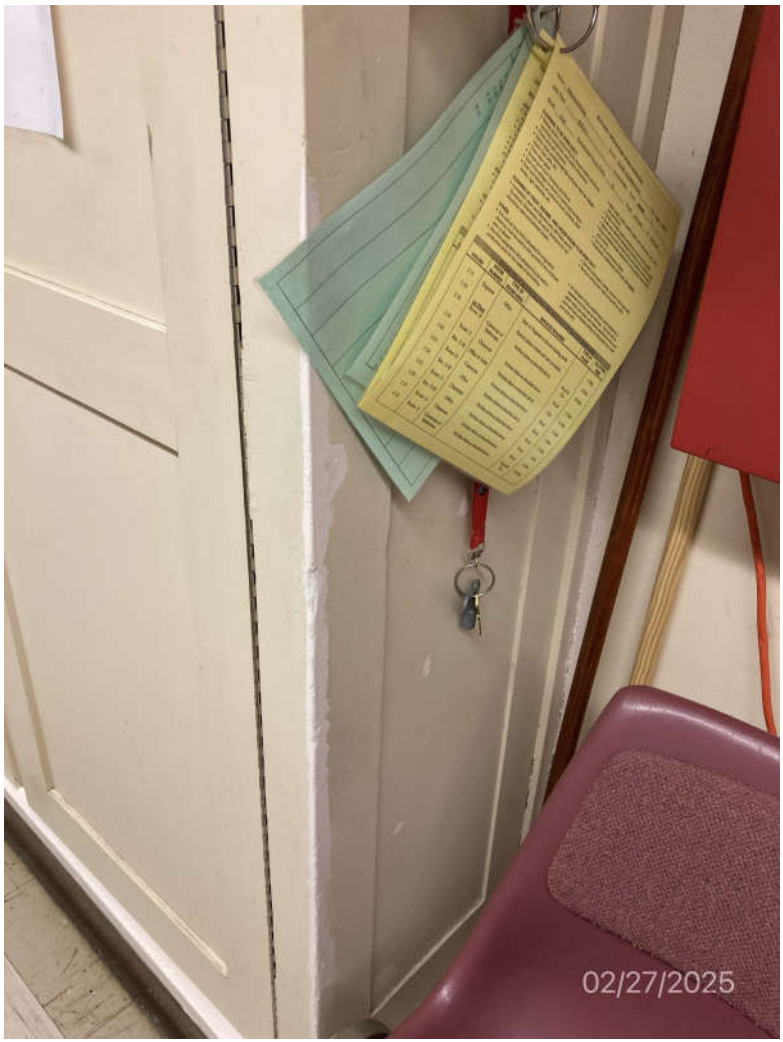

02/27/2025


02/27/2025


02/27/2025

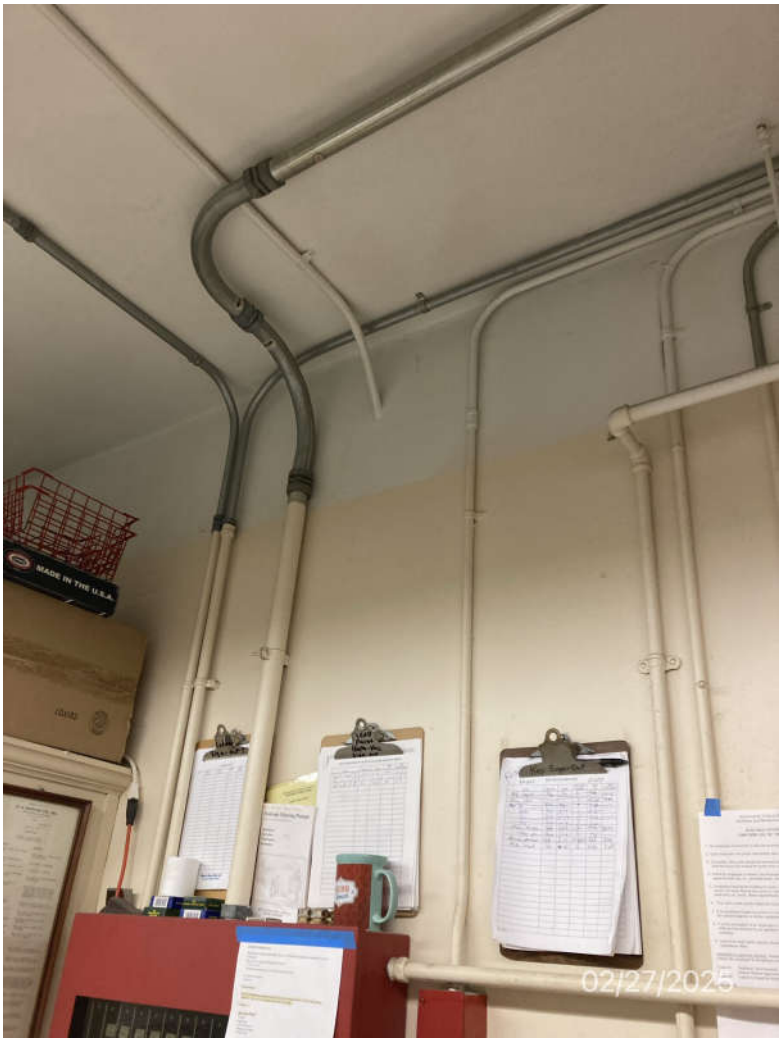

02/27/2025

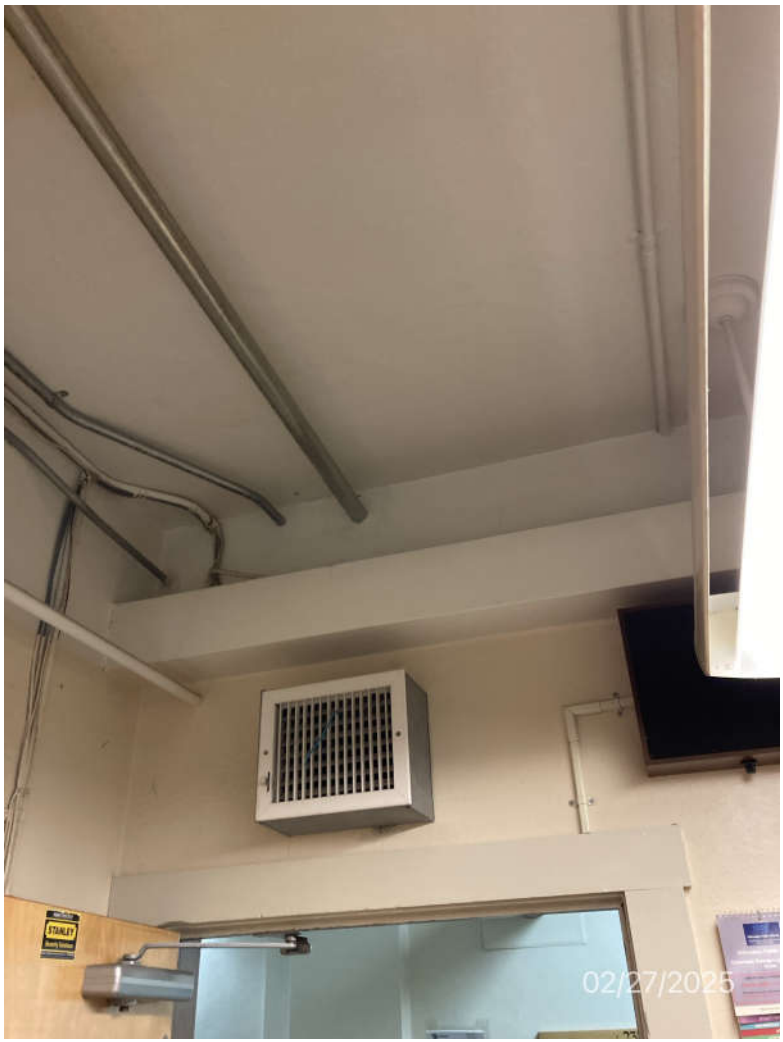

MPC-200
Fiberlock
LEAD SAFE
LEAD DUST CLEANER
02/27/2025


02/27/2025

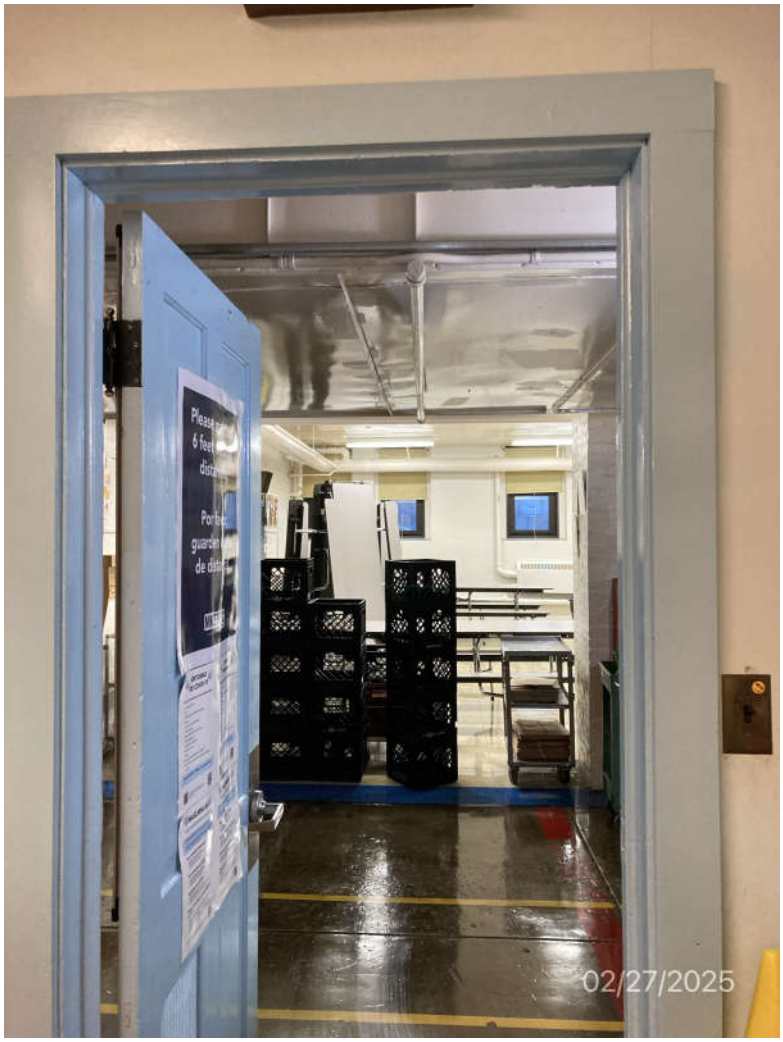

02/27/2025

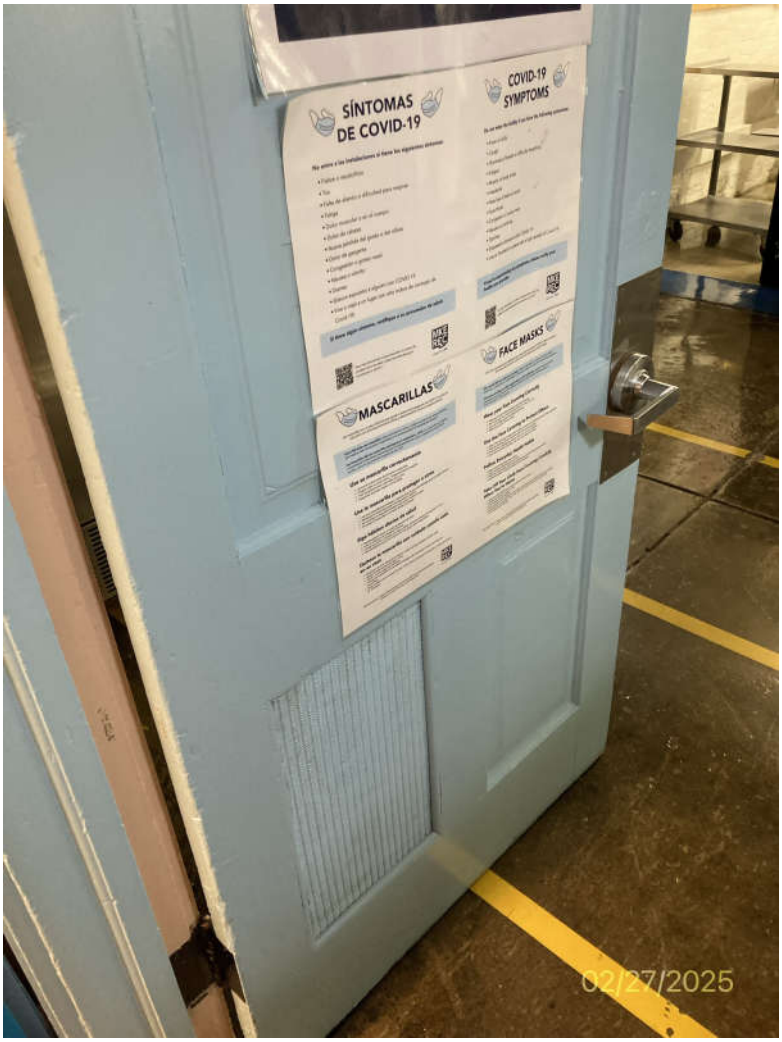

02/27/2025


02/27/2025


02/27/2025

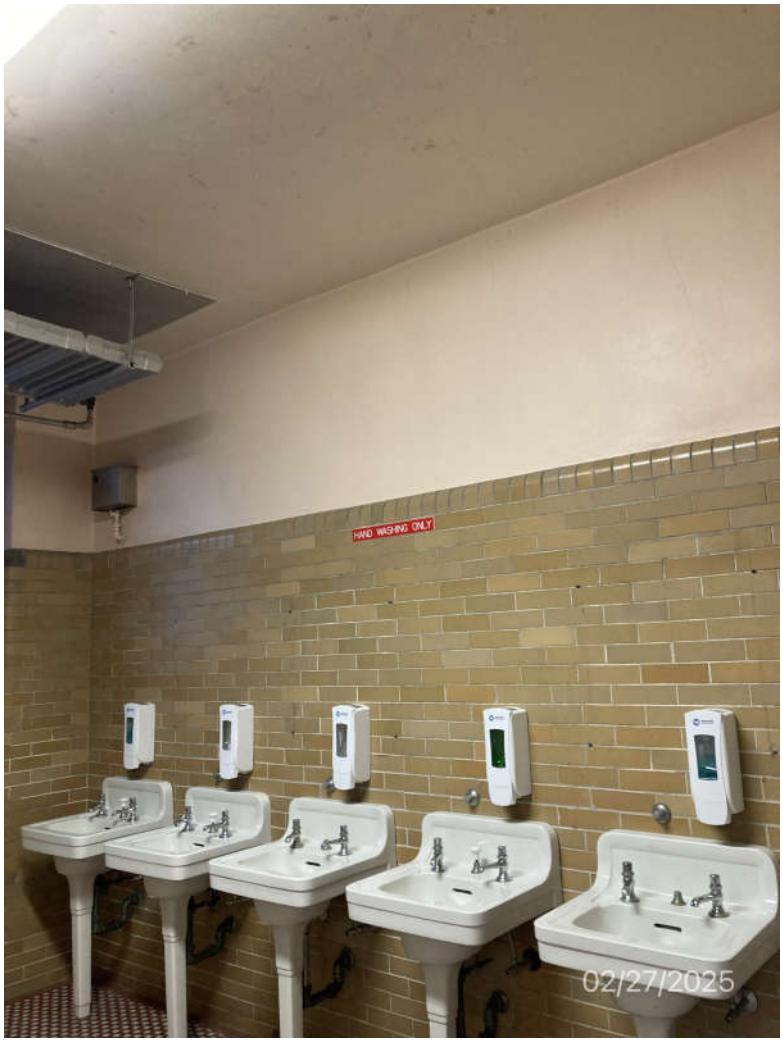



02/27/2025


SÍNTOMAS DE COVID-19
COVID-19 SYMPTOMS
FACE MASKS
MASCARILLAS
02/27/2025


02/27/2025


CAUTION
ASBESTOS HAZARDOUS
02/27/2025


HAND WASHING ONLY
02/27/2025

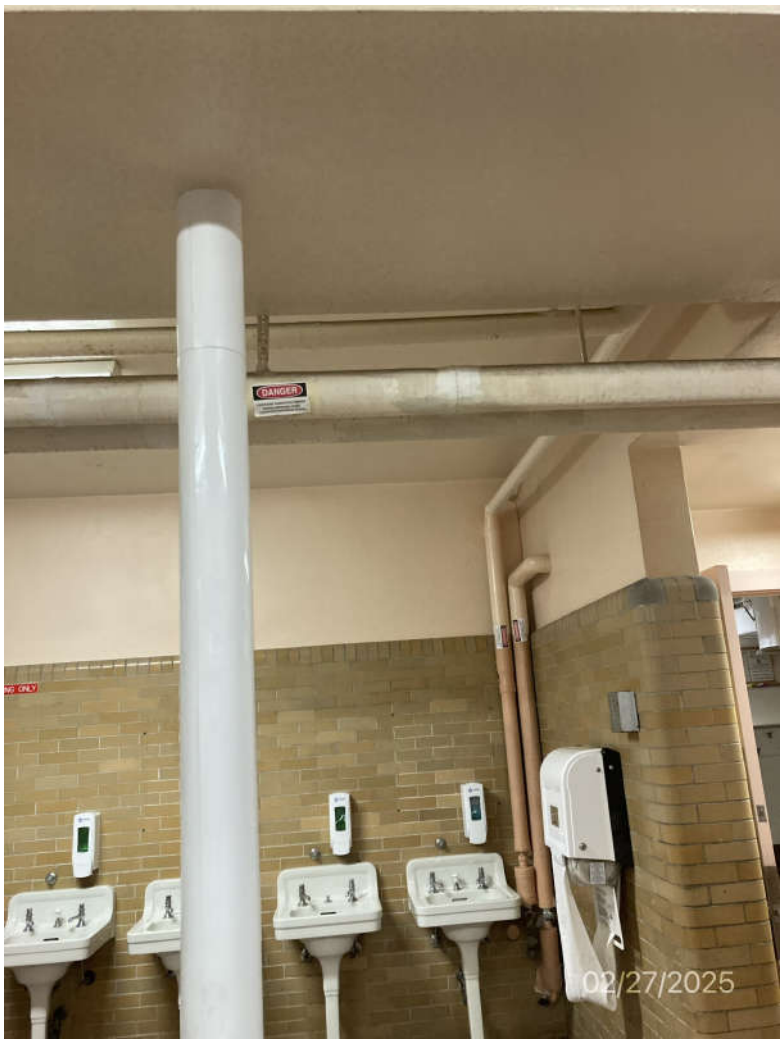

02/27/2025


02/27/2025


02/27/2025


02/27/2025

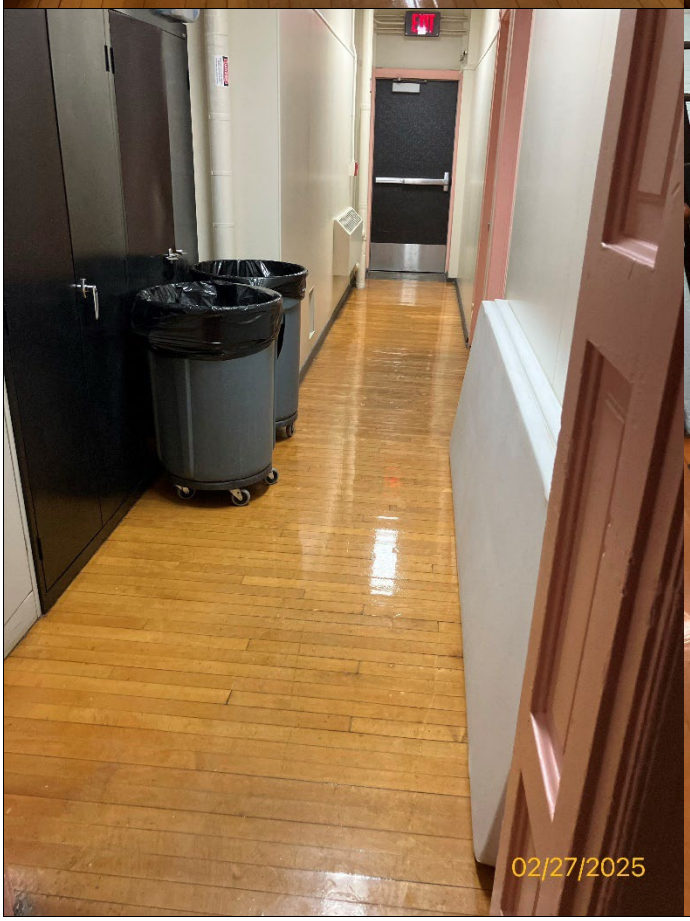

02/27/2025


DANGER
02/27/2025

First Floor









First Floor


02/27/2025


02/27/2025


¿Cómo?
¿Por qué?
¿Cuanto?
¿Cuál?
02/27/2025


02/27/2025

Third Floor


Feb 27, 2025 at 06:43:2


Feb 27, 2025 at 06:23:1
MANTENGA
LA
HUMILDAD




Feb 27, 2025 at 06:38:4

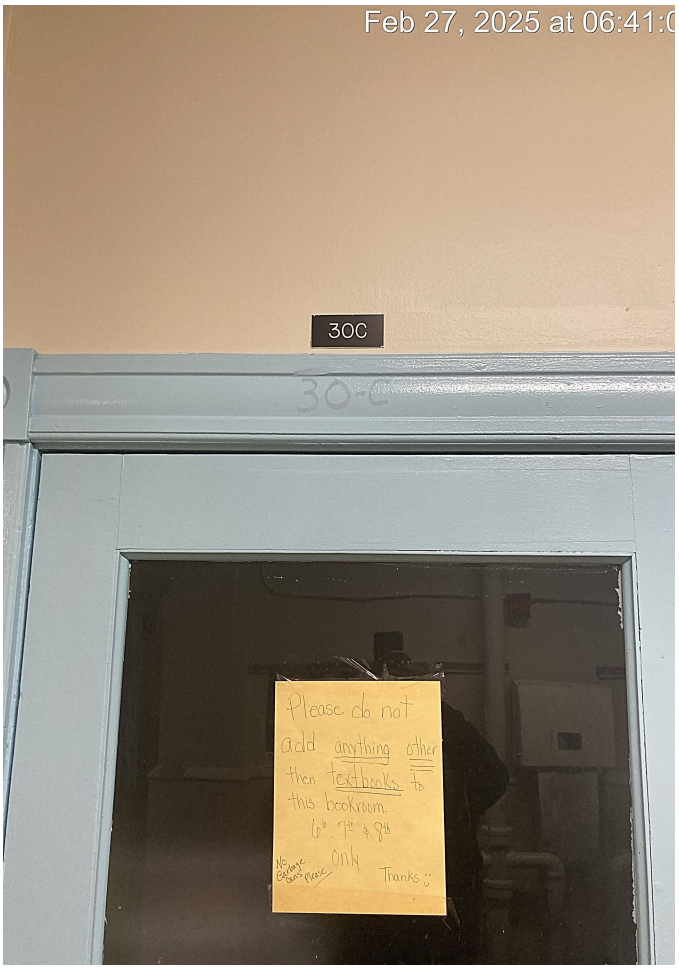

Feb 27, 2025 at 06:39:1
HUMILDAD

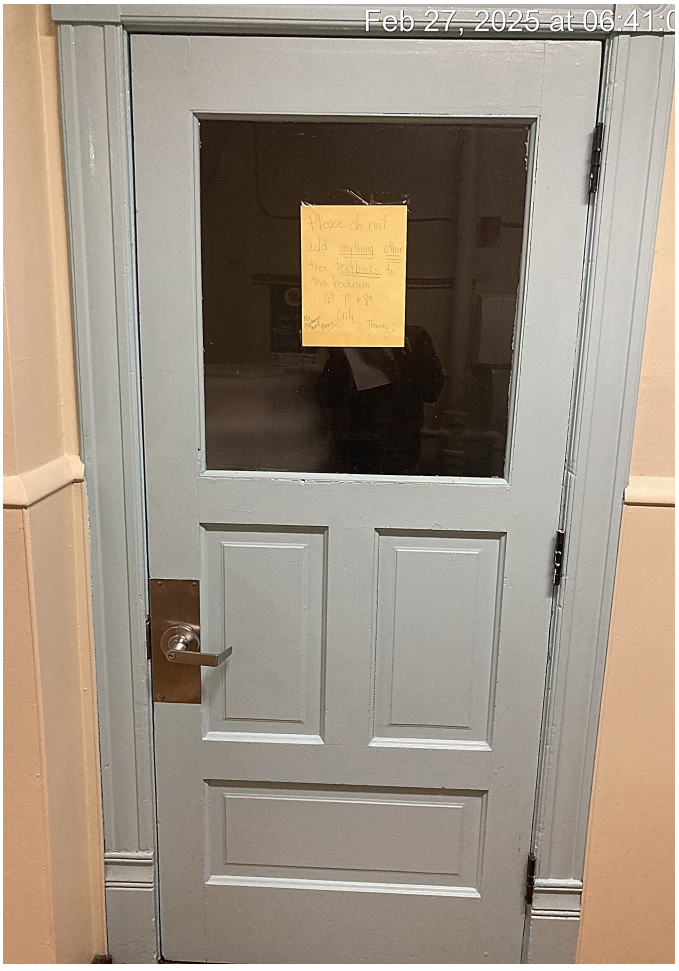

Feb 27, 2025 at 06:39:1


Feb 27, 2025 at 06:40:2
30
READ
to enter
school!
WRITE


Feb 27, 2025 at 06:40:2


Feb 27, 2025 at 06:40:3

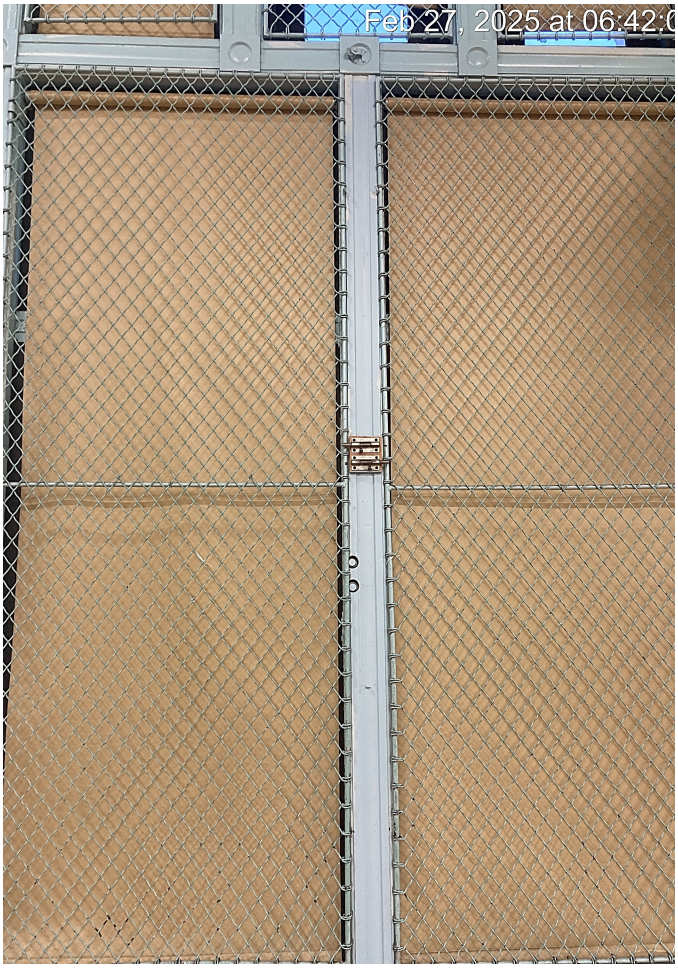

Feb 27, 2025 at 06:41:0
300
Please do not
add anything other
than textbooks to
this bookroom.
6th, 7th & 8th
ONLY
Thanks :)


Feb 27, 2025 at 06:41:0

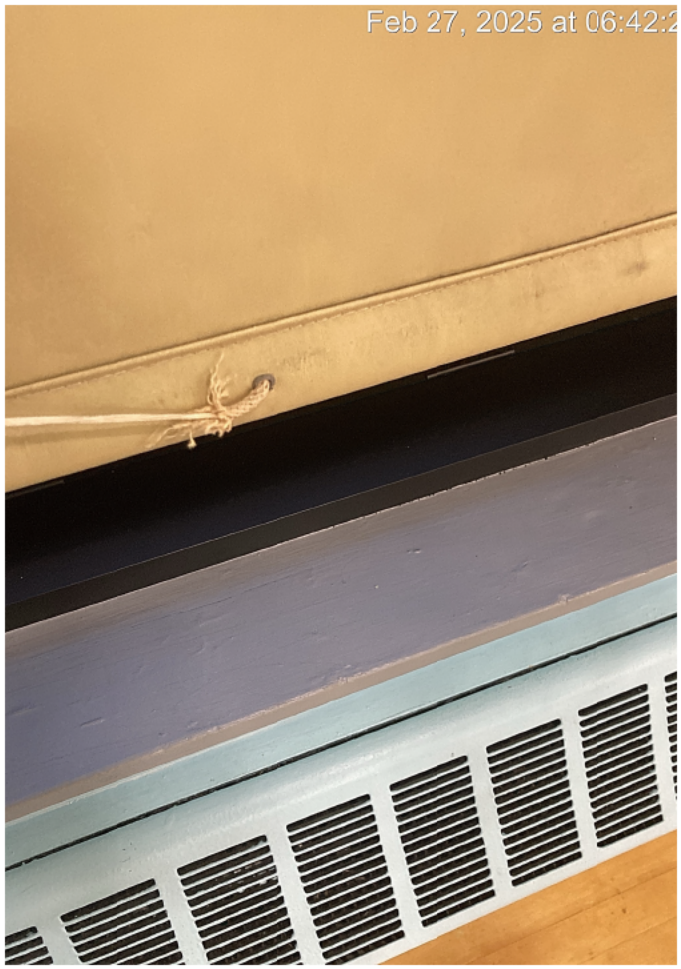

Feb 27, 2025 at 06:41:1


Feb 27, 2025 at 06:41:4

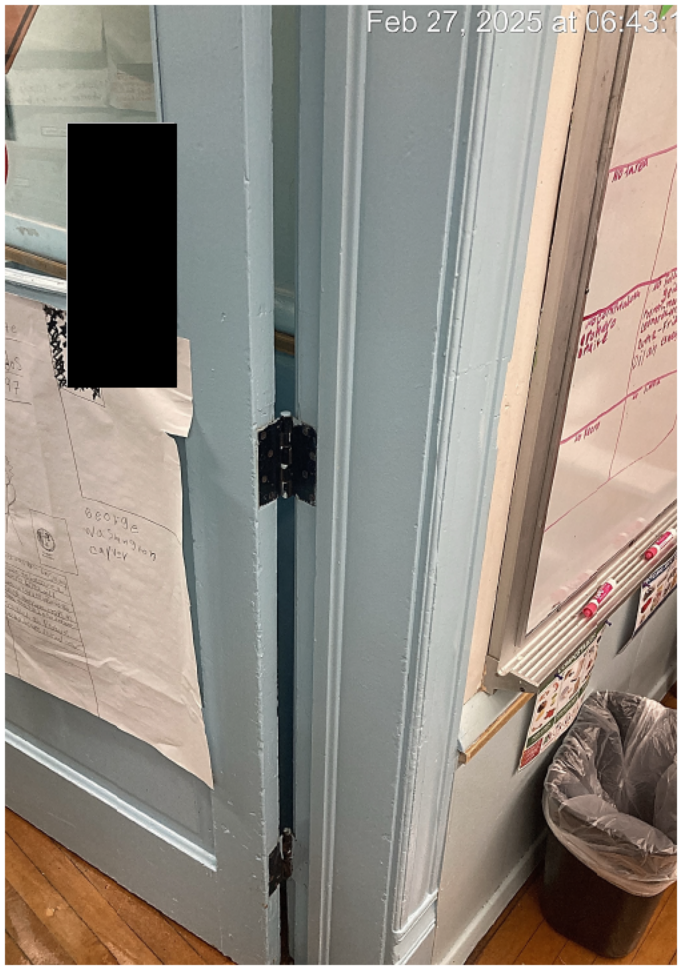

Feb 27, 2025 at 06:41:5


Feb 27, 2025 at 06:42:0


Feb 27, 2025 at 06:42:1


Feb 27, 2025 at 06:42:2


Feb 27, 2025 at 06:43:1
32


Feb 27, 2025 at 06:43:1

APPENDIX D: Ongoing Monitoring

It's unusual to remove all lead-based paint (LBP) from the property. This means that new hazards can develop when:

- Control measures fail (for example, damage to an enclosure).
- LBP becomes deteriorated.
- Dust from friction, impact, or other deterioration collects on floors or windowsills.
- Contaminated dust and soil from outside are tracked inside.

To keep the building safe, the owner should:

- Visually assess for hazards at least once a year after the risk assessment or controlling hazards.
- Hire a certified lead risk assessor for a reevaluation of the property every two years.

Visual Assessment

Who can do it

The owner of the property (or their agent)

When to do it

Start annual visual assessments one year after the risk assessment or any hazard reduction work. Also do one when:

- A staff reports deteriorated paint or other possible lead hazards.
- A classroom is no longer operational (assess before its re-opened)
- A classroom, hallway, stairway, etc. sustains any damage

How to do it

Go through the building and each common area, including exterior painted surfaces and ground cover. Check for:

- Deterioration on any untested surfaces and surfaces with known LBP.
- Structural problems that could make LBP or untested paint fail.
- Continued integrity of enclosures and encapsulants used to control LBP hazards.

Reevaluation

Who can do it

A certified lead risk assessor

When to do it

Start biennial reevaluations two years after the risk assessment or any hazard reduction work. Then, reevaluate every two years (plus or minus 60 days). If two consecutive reevaluations find no LBP hazards, you can stop doing them.

How it is done

A reevaluation is a risk assessment that builds on a previous investigation report. If hazards were controlled after a previous risk assessment, the risk assessor makes sure they are still effective. Then, the risk assessor identifies any new LBP hazards by:

- Looking for deteriorated paint. If that paint wasn't already tested, the risk assessor tests it.
- Looking for other potential hazards, such as new bare soil and friction surfaces.
- Collecting new dust wipe samples and soil samples, if new areas of bare soil are present.

The risk assessor compiles info on all LBP hazards into a written risk assessment report. The risk assessor also recommends options for controlling all LBP hazards.

[i] www.dhs.wisconsin.gov/lead/index.htm

[ii] Wis. Admin Code DHS Chapter 163 https://docs.legis.wisconsin.gov/code/admin_code/dhs/110/163/Title

[iii] www.epa.gov/lead/protect-your-family-lead-your-home-real-estate-disclosure

[iv] Appendix 13.1: Wipe Sampling of Settled Dust for Lead Determination www.hud.gov/sites/documents/LBPH-40.PDF