

Visual Lead Clearance Examination Report

For the property at:

Fernwood Montessori

School 3239 S.

Pennsylvania Ave

Milwaukee, WI. 53207

Conducted on:

First attempt on:

4/21/2025

7:00 am



Clearance achieved on:

4/22/2025

10:30 am

Clearance and report completed by:

Milwaukee Health Department- Lead Risk Assessors

04/23/2025

Date of Report



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 control work. Lead clearance examinations are regulated by the [Wisconsin Department of Health Servicesⁱ](#) (DHS) under [Wis. Admin. Code ch. DHS 163ⁱⁱ](#).

1.1 Findings

On **04/21/25**—Based on the results of laboratory analysis of dust samples, lead dust hazards were identified in on floors in the utility room (in the Corridor 1-2), corridor 2-1 (North side) and in room 030 (Boys Bathroom), and in the windowsill in room 008 **This project has failed clearance.** MPS paint department staff were notified of their responsibility to re-clean all failed components and all like components in all un-sampled rooms.

On **4/22/2025**—Based on the results of the visual inspection and laboratory analysis of 5 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.

1.2 Abatement activities

Abatement activities did not take place.

1.3 Renovation or interim control activities

Interior renovation or interim control work was started on 3/13/2025 and all work, including final cleaning, was completed on 04/21/2025.

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.

2. 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 Homeⁱⁱⁱ](#), 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 Determinationⁱⁱⁱ](#), 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 ($\mu\text{g}/\text{ft}^2$) on floors, <100 $\mu\text{g}/\text{ft}^2$ on windowsills, <100 $\mu\text{g}/\text{ft}^2$ in window troughs, and <40 $\mu\text{g}/\text{ft}^2$ on exterior porch.

4.0 Full results

4.1 Visual inspection of the interior

On 4/21/2025, a visual inspection was conducted in the following areas: **classrooms, and common areas on the ground, first, second and third 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 4/22/2025, a visual inspection was conducted in the following areas: **classrooms, and common areas on the ground, first, second and third 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 Dust analysis results

On **4/21/2025**, risk assessor collected **64** single surface wipe samples to find out if lead dust hazards were present on floors, windowsills, **and** window troughs.

Samples, including a generically labeled “field blank” wipe 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: **3239 S Pennsylvania Ave**

Collection date: 4/21/2025

Collection time: 07:00 am

Date results received: 4/22/2025

Ground Floor

Sample	Room Equivalent/Location	Surface	Result (µg/ft²)	Standard (µg/ft²)	Pass/Fail
1	Cafeteria	Floor	<5	< 10	pass
2	Boys Bathroom	Floor	<5	< 10	pass
3	Girls Bathroom	Floor	<5	< 10	pass
4	008	Floor	<5	< 10	pass
5	008	Sill	130	< 100	fail
6	007	Floor	<5	< 10	pass
7	007	Sill	<45	< 100	pass
8	006	Floor	<5	< 10	pass
9	006	Sill	<45	< 100	pass
10	005	Floor	<5	< 10	pass
11	005	Sill	<45	< 100	pass
12	003	Floor	<5	< 10	pass
13	003	Sill	<45	< 100	pass
14	003C	Floor	<5	< 10	pass
15	G-1 middle	Floor	<5	< 10	pass
16	Stairway 3	Floor	<5	< 10	pass
17	Stairway 1	Floor	<5	< 10	pass
18	Quality Control	Blank	<5	<5	pass

First Floor

Sample	Room Equivalent/Location	Surface	Result (µg/ft²)	Standard (µg/ft²)	Pass/Fail
1	Corr 1-2 (West)	Floor	<5	< 10	pass
2	Corr 1-2 (East)	Floor	<5	< 10	pass
3	Corr 1-1	Sill	<45	< 100	pass
4	Corr 1-1	Floor	<5	< 10	pass
5	Corr 1-3	Sill	<45	< 100	pass
6	Corr 1-3	Floor	<5	< 10	pass
7	Restroom 18 (Corr 1-2)	Floor	<5	< 10	pass
8	Kindergarten Room 13	Sill	<45	< 100	pass
9	Kindergarten Room 13	Floor	<5	< 10	pass
10	Kindergarten Room 13 (Bathroom)	Floor	<5	< 10	pass
12	Room 17	Sill	<45	< 100	pass
13	Room 17	Floor	<5	< 10	pass
14	Room 014	Floor	<5	< 10	pass
15	Utility Room (Corr 1-2)	Floor	20	< 10	fail
16	Room 11	Floor	<5	< 10	pass
17	Room 11	Sill	<45	< 100	pass
18	Room 12	Floor	<5	< 10	pass
19	Room 12	Sill	<45	< 100	pass

11	Quality Control	Blank	<5	<5	pass
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Second Floor

Sample	Room Equivalent/Location	Surface	Result (µg/ft²)	Standard (µg/ft²)	Pass/Fail
1	CORR 2-1 NORTH SIDE	Floor	11	< 10	fail
2	CORR 2-1 SOUTH SIDE	Floor	<5.0	< 10	pass
3	26	Floor	<5.0	< 10	pass
4	26	Sill	<45	< 100	pass
5	24	Floor	<5.0	< 10	pass
6	24	Sill	<45	< 100	pass
7	22	Floor	<5.0	< 10	pass
8	22	Sill	<45	< 100	pass
9	STAIR 1-F2	Floor	7.8	< 10	pass
10	STAIR 1-F2	Sill	<45	< 100	pass
12	24C	Floor	<5.0	< 10	pass
13	23B	Floor	<5.0	< 10	pass

11	Quality Control	Blank	<5.0	<5.0	pass
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Third Floor

Sample	Room Equivalent/Location	Surface	Result (µg/ft²)	Standard (µg/ft²)	Pass/Fail
1	Stair 3F-3	Floor	<5	< 10	pass
2	Stair 3F-3	Sill	<45	< 100	pass
3	Room 034	Floor	<5	< 10	pass
4	Room 034	Sill	<45	< 100	pass
5	Room 032	Floor	<5	< 10	pass
6	Room 032	Sill	<45	< 100	pass
7	Room 035	Floor	<5	< 10	pass
8	Room 035	Sill	<45	< 100	pass
9	Room 037	Floor	<5	< 10	pass
10	Room 037	Sill	<45	< 100	pass
11	Room 030 Boys bathroom	Floor	47	< 10	fail
12	Room 039 Girls bathroom	Floor	<5	< 10	pass
13	Coor 3-1	Floor	<5	< 10	pass

14	Quality Control	Blank	<5	<5	pass
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On **4/22/2025** a total of **5** 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. Samples were analyzed by the:

Wipe sampling summary table

Property address: **3239 S Pennsylvania Ave**

Collection date: 4/22/2025

Collection time: 10:30 am

Date results received: 4/23/2025

Sample	Room Equivalent/Location	Surface	Result (µg/ft²)	Standard (µg/ft²)	Pass/Fail
1	Ground floor room 008	Sill	<45	< 100	pass
2	1st floor Utility room -corr 1-2	Floor	<5	< 10	pass
3	2nd floor CORR 2-1 Northside	Floor	<5	< 10	pass
4	3rd floor room 030 Boys toilet	Floor	<5	< 10	pass

5	Quality Control	Blank	<5	<5.0	PASS
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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 : Z2210005

LRN : 0000325395

Auxiliary ID : 54706

Date Collected: 04/21/25

Date Received : 04/21/25

Requested by: [REDACTED]

FINAL

Patient Name: CP/S/PENNSYLVANIA, 3239

DOB:

Age:

Sex:

Ord. Comm: 18 BASE CLearance Dust Wipes

Order 54706

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
COLLECTED 04/21/25 07:00 RECEIVED 04/21/25 09:01					
Sample 1					
Dust Wipe 1	*<5.0			ug/sq.ft.	04/21/25 17:05
Width	*12.00			in.	04/21/25 17:05
Length	*12.00			in.	04/21/25 17:05
Sample 2					
Dust Wipe 2	*<5.0			ug/sq.ft.	04/21/25 17:05
Width	*12.00			in.	04/21/25 17:05
Length	*12.00			in.	04/21/25 17:05
Sample 3					
Dust Wipe 3	*<5.0			ug/sq.ft.	04/21/25 17:05
Width	*12.00			in.	04/21/25 17:05
Length	*12.00			in.	04/21/25 17:05
Sample 4					
Dust Wipe 4	*<5.0			ug/sq.ft.	04/21/25 17:05
Width	*12.00			in.	04/21/25 17:05
Length	*12.00			in.	04/21/25 17:05

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

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
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Submitter copy to:

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

Order ID : Z2210005

LRN : 0000325395

Auxiliary ID : 54706

Date Collected: 04/21/25

Date Received : 04/21/25

Requested by: [REDACTED]

FINAL

Patient Name: CP/S/PENNSYLVANIA, 3239

DOB:

Age:

Sex:

Ord. Comm: 18 BASE CLearance Dust Wipes

Order 54706

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 5					
Dust Wipe 5	*130			ug/sq.ft.	04/21/25 17:05
Width	*2.00			in.	04/21/25 17:05
Length	*8.00			in.	04/21/25 17:05
Sample 6					
Dust Wipe 6	*<5.0			ug/sq.ft.	04/21/25 17:05
Width	*12.00			in.	04/21/25 17:05
Length	*12.00			in.	04/21/25 17:05
Sample 7					
Dust Wipe 7	*<45			ug/sq.ft.	04/21/25 17:05
Width	*2.00			in.	04/21/25 17:05
Length	*8.00			in.	04/21/25 17:05
Sample 8					
Dust Wipe 8	*<5.0			ug/sq.ft.	04/21/25 17:05
Width	*12.00			in.	04/21/25 17:05
Length	*12.00			in.	04/21/25 17:05
Sample 9					
Dust Wipe 9	*<45			ug/sq.ft.	04/21/25 17:05
Width	*2.00			in.	04/21/25 17:05
Length	*8.00			in.	04/21/25 17:05

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

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BASE LEAD PROGRAM
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Order ID : Z2210005

LRN : 0000325395

Auxiliary ID : 54706

Date Collected: 04/21/25

Date Received : 04/21/25

Requested by: [REDACTED]

FINAL

Patient Name: CP/S/PENNSYLVANIA, 3239

DOB:

Age:

Sex:

Ord. Comm: 18 BASE CLearance Dust Wipes

Order 54706

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 10					
Dust Wipe 10	*<5.0			ug/sq.ft.	04/21/25 17:05
Width	*12.00			in.	04/21/25 17:05
Length	*12.00			in.	04/21/25 17:05
Sample 11					
Dust Wipe 11	*<45			ug/sq.ft.	04/21/25 17:05
Width	*2.00			in.	04/21/25 17:05
Length	*8.00			in.	04/21/25 17:05
Sample 12					
Dust Wipe 12	*<5.0			ug/sq.ft.	04/21/25 17:05
Width	*12.00			in.	04/21/25 17:05
Length	*12.00			in.	04/21/25 17:05
Sample 13					
Dust Wipe 13	*<45			ug/sq.ft.	04/21/25 17:05
Width	*2.00			in.	04/21/25 17:05
Length	*8.00			in.	04/21/25 17:05
Sample 14					
Dust Wipe 14	*<5.0			ug/sq.ft.	04/21/25 17:05
Width	*12.00			in.	04/21/25 17:05
Length	*12.00			in.	04/21/25 17:05

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

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 : Z2210005

LRN : 0000325395

Auxiliary ID : 54706

Date Collected: 04/21/25

Date Received : 04/21/25

Requested by: [REDACTED]

FINAL

Patient Name: CP/S/PENNSYLVANIA, 3239

DOB:

Age:

Sex:

Ord. Comm: 18 BASE CLearance Dust Wipes

Order 54706

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 15					
Dust Wipe 15	*<5.0			ug/sq.ft.	04/21/25 17:05
Width	*12.00			in.	04/21/25 17:05
Length	*12.00			in.	04/21/25 17:05
Sample 16					
Dust Wipe 16	*<5.0			ug/sq.ft.	04/21/25 17:05
Width	*12.00			in.	04/21/25 17:05
Length	*12.00			in.	04/21/25 17:05
Sample 17					
Dust Wipe 17	*<5.0			ug/sq.ft.	04/21/25 17:05
Width	*12.00			in.	04/21/25 17:05
Length	*12.00			in.	04/21/25 17:05
Sample 18					
Dust Wipe 18	*<5.0			ug/sq.ft.	04/21/25 17:05
Width	*12.00			in.	04/21/25 17:05
Length	*12.00			in.	04/21/25 17:05

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

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 : Z2210005

LRN : 0000325395

Auxiliary ID : 54706

Date Collected: 04/21/25

Date Received : 04/21/25

Requested by:

FINAL

Patient Name: CP/S/PENNSYLVANIA, 3239

DOB:

Age:

Sex:

Ord. Comm: 18 BASE CLearance Dust Wipes

Order 54706

Lead in Dust Wipes

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

Test Method

*see below

04/21/25 10:44

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

Lab No. _____

**H-3044 Lead Dust Sample
Collection and Results**Date 04/21/25☐ HUD ☒ Base ☐ CDBGInspector 

	Last Name	First Name	Phone
Owner's Name			
Contractor			

Street No.	Street Name	Apt. No.	City	Zip Code
3239	S. Pennsylvania Ave		Milwaukee	53207

☐ Prewipe ☒ Clearance ☐ Interim ☐ Re-Wipe

Sample No.	Room Type	Sample Type	Substrate Type	Substrate Condition	Sample Area Meas.	Comments
1	9	A	6	2	12x12	Cafe
2	7	A	6	2	12x12	Boys Bath
3	7	A	6	2	12x12	Girls Bath
4	9	A	6	2	12x12	Rm# 008
5	9	B	6	2	2x8	Rm# 008
6	9	A	1	2	12x12	Rm# 7
7	9	B	6	2	2x8	Rm# 7
8	9	A	1	2	12x12	Rm# 006
9	9	B	6	2	2x8	Rm# 006
10	9	A	1	2	12x12	Rm# 5
11	9	B	6	2	2x8	Rm# 5
12	9	A	3	2	12x12	Rm# 3
13	9	B	6	2	12x12	Rm# 3 ← 2x8
14	9	A	3	2	12x12	Rm# 3c Email 
15	9	A	6	2	12x12	G1 - middle
16	9	A	6	2	12x12	~~Stairway~~ 3
17	9	A	6	2	12x12	Stairway 1
18	9	A	6	2	12x12	Gym

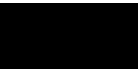
Codes:

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

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 4-21-2025Analyst 

Z2210005 --> **URGENT**
 CP/S/PENNSYLVANIA, 3239
 Mm: 0000325395 B#: 0000325395
 BASE:: LDUST Dob:



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 : Z2210002

LRN : 0000325395

Auxiliary ID : 54708

Date Collected: 04/21/25

Date Received : 04/21/25

Requested by:

FINAL

Patient Name: CP/S/PENNSYLVANIA, 3239

DOB:

Age:

Sex:

Ord. Comm: 54708, BASE - 19 Clearance wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
COLLECTED 04/21/25 08:55 RECEIVED 04/21/25 08:58					

Sample 1

Dust Wipe 1	*<5.0			ug/sq.ft.	04/21/25 17:03
Width	*12.00			in.	04/21/25 17:03
Length	*12.00			in.	04/21/25 17:03

Sample 2

Dust Wipe 2	*<5.0			ug/sq.ft.	04/21/25 17:03
Width	*12.00			in.	04/21/25 17:03
Length	*12.00			in.	04/21/25 17:03

Sample 3

Dust Wipe 3	*<45			ug/sq.ft.	04/21/25 17:03
Width	*2.00			in.	04/21/25 17:03
Length	*8.00			in.	04/21/25 17:03

Sample 4

Dust Wipe 4	*<5.0			ug/sq.ft.	04/21/25 17:03
Width	*12.00			in.	04/21/25 17:03
Length	*12.00			in.	04/21/25 17:03

Sample 5

Dust Wipe 5	*<45			ug/sq.ft.	04/21/25 17:03
Width	*2.00			in.	04/21/25 17:03
Length	*8.00			in.	04/21/25 17:03

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

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 : Z2210002

LRN : 0000325395

Auxiliary ID : 54708

Date Collected: 04/21/25

Date Received : 04/21/25

Requested by: [REDACTED]

FINAL

Patient Name: CP/S/PENNSYLVANIA, 3239

DOB:

Age:

Sex:

Ord. Comm: 54708, BASE - 19 Clearance wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 6					
Dust Wipe 6	*<5.0			ug/sq.ft.	04/21/25 17:03
Width	*12.00			in.	04/21/25 17:03
Length	*12.00			in.	04/21/25 17:03
Sample 7					
Dust Wipe 7	*<5.0			ug/sq.ft.	04/21/25 17:03
Width	*12.00			in.	04/21/25 17:03
Length	*12.00			in.	04/21/25 17:03
Sample 8					
Dust Wipe 8	*<45			ug/sq.ft.	04/21/25 17:03
Width	*2.00			in.	04/21/25 17:03
Length	*8.00			in.	04/21/25 17:03
Sample 9					
Dust Wipe 9	*<5.0			ug/sq.ft.	04/21/25 17:03
Width	*12.00			in.	04/21/25 17:03
Length	*12.00			in.	04/21/25 17:03
Sample 10					
Dust Wipe 10	*<5.0			ug/sq.ft.	04/21/25 17:03
Width	*12.00			in.	04/21/25 17:03
Length	*12.00			in.	04/21/25 17:03

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

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 : Z2210002

LRN : 0000325395

Auxiliary ID : 54708

Date Collected: 04/21/25

Date Received : 04/21/25

Requested by: [REDACTED]

FINAL

Patient Name: CP/S/PENNSYLVANIA, 3239

DOB:

Age:

Sex:

Ord. Comm: 54708, BASE - 19 Clearance wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 11					
Dust Wipe 11	*<5.0			ug/sq.ft.	04/21/25 17:03
Width	*12.00			in.	04/21/25 17:03
Length	*12.00			in.	04/21/25 17:03
Sample 12					
Dust Wipe 12	*<45			ug/sq.ft.	04/21/25 17:03
Width	*2.00			in.	04/21/25 17:03
Length	*8.00			in.	04/21/25 17:03
Sample 13					
Dust Wipe 13	*<5.0			ug/sq.ft.	04/21/25 17:03
Width	*12.00			in.	04/21/25 17:03
Length	*12.00			in.	04/21/25 17:03
Sample 14					
Dust Wipe 14	*<5.0			ug/sq.ft.	04/21/25 17:03
Width	*12.00			in.	04/21/25 17:03
Length	*12.00			in.	04/21/25 17:03
Sample 15					
Dust Wipe 15	*20			ug/sq.ft.	04/21/25 17:03
Width	*12.00			in.	04/21/25 17:03
Length	*12.00			in.	04/21/25 17:03

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

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
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 1st Floor
 Milwaukee, WI 53202

Order ID : Z2210002

LRN : 0000325395

Auxiliary ID : 54708

Date Collected: 04/21/25

Date Received : 04/21/25

Requested by: [REDACTED]

FINAL

Patient Name: CP/S/PENNSYLVANIA, 3239

DOB:

Age:

Sex:

Ord. Comm: 54708, BASE - 19 Clearance wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 16					
Dust Wipe 16	*<5.0			ug/sq.ft.	04/21/25 17:03
Width	*12.00			in.	04/21/25 17:03
Length	*12.00			in.	04/21/25 17:03
Sample 17					
Dust Wipe 17	*<45			ug/sq.ft.	04/21/25 17:03
Width	*2.00			in.	04/21/25 17:03
Length	*8.00			in.	04/21/25 17:03
Sample 18					
Dust Wipe 18	*<5.0			ug/sq.ft.	04/21/25 17:03
Width	*12.00			in.	04/21/25 17:03
Length	*12.00			in.	04/21/25 17:03
Sample 19					
Dust Wipe 19	*<45			ug/sq.ft.	04/21/25 17:03
Width	*2.00			in.	04/21/25 17:03
Length	*8.00			in.	04/21/25 17:03

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

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 : Z2210002

LRN : 0000325395

Auxiliary ID : 54708

Date Collected: 04/21/25

Date Received : 04/21/25

Requested by:

FINAL

Patient Name: CP/S/PENNSYLVANIA, 3239

DOB:

Age:

Sex:

Ord. Comm: 54708, BASE - 19 Clearance wipes

Lead in Dust Wipes

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

Test Method

*see below

04/21/25 09:54

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

Lab No. _____

**H-3044 Lead Dust Sample
Collection and Results**Date 4/21/25Inspector ☐ HUD ☒ Base ☐ CDBG

	Last Name	First Name	Phone
Owner's Name			
Contractor			

Street No.	Street Name	Apt. No.	City	Zip Code
3239	S. Pennsylvania Ave.		Milwaukee	53207

☐ Prewipe ☒ Clearance ☐ Interim ☐ Re-Wipe

Sample No.	Room Type	Sample Type	Substrate Type	Substrate Condition	Sample Area Meas.	Comments
1	4	A	6	2	12x12	Corr 1-2 Floor (West)
2	4	A	6	2	12x12	Corr 1-2 Floor (East)
3	4	B	6	3	2x8	Corr 1-1 Windowsill
4	4	A	6	3	12x12	Corr 1-1 Floor
5	4	B	6	2	2x8	Corr 1-3 Window Sill
6	4	A	6	3	12x12	Corr 1-3 Floor
7	7	A	6	3	12x12	Rest Room 18 (Corr 1-2) Floor (Tik)
8	9	B	6	3	2x8	Kindergarten Room 13 Window Sill
9	9	A	3	2	12x12	Kindergarten Room 13 Floor
10	7	B	6	3	12x12	Kindergarten Room 13 (Bathroom Floor) - Day 3
11	9	A	1	3	12x12	Ifo Gaming Area.
12	9	B	6	2	2x8	Room 17 Window Sill
13	9	A	6	2	12x12	Room 17 Floor
14	9	A	6	2	12x12	Room 014 Floor
15	9	A	6	1	12x12	Utility Room (Corr 1-2)
16	9	A	6	2	12x12	Room 11 Floor
17	9	B	6	2	2x8	Room 11 Window Sill
18	9	A	6	2	12x12	Room 12 Floor
19	9	B	6	2	2x8	Room 12 ~~2x8~~ Window Sill

Codes:

Z2210002 --> URGENT

Room Type: 1 = Living Rm. 2 = Kitc

CP/S/PENNSYLVANIA, 3239

Mn: 0000325395

B#: 0000325395

3 = Bedroom 4 = Family Rm. 5 = Bedroom 6 = Family Rm. 7 = Bathroom 8 = Basement 9 = Other

Sample Type: A = Floor B = Interior

BASE::
LDUST

Dob:

Substrate Type: 1 = Vinyl 2 = Carpet 3

Concrete 6 = Other

Substrate Condition: 1 = Deteriorated 2 = M

Date Reported 4-21-25Analyst 

Collected 4/21/25 8:55am

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 : Z2210000

LRN : 0000325395

Auxiliary ID : 54707

Date Collected: 04/21/25

Date Received : 04/21/25

Requested by:

FINAL

Patient Name: CP/S/PENNSYLVANIA, 3239

DOB:

Age:

Sex:

Ord. Comm: 54707, BASE - 13 Clearance wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
COLLECTED 04/21/25 07:10 RECEIVED 04/21/25 08:58					

Sample 1

Dust Wipe 1	*11			ug/sq.ft.	04/21/25 17:09
Width	*12.00			in.	04/21/25 17:09
Length	*12.00			in.	04/21/25 17:09

Sample 2

Dust Wipe 2	*<5.0			ug/sq.ft.	04/21/25 17:09
Width	*12.00			in.	04/21/25 17:09
Length	*12.00			in.	04/21/25 17:09

Sample 3

Dust Wipe 3	*<5.0			ug/sq.ft.	04/21/25 17:09
Width	*12.00			in.	04/21/25 17:09
Length	*12.00			in.	04/21/25 17:09

Sample 4

Dust Wipe 4	*<45			ug/sq.ft.	04/21/25 17:09
Width	*2.00			in.	04/21/25 17:09
Length	*8.00			in.	04/21/25 17:09

Sample 5

Dust Wipe 5	*<5.0			ug/sq.ft.	04/21/25 17:09
Width	*12.00			in.	04/21/25 17:09
Length	*12.00			in.	04/21/25 17:09

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

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 : Z2210000

LRN : 0000325395

Auxiliary ID : 54707

Date Collected: 04/21/25

Date Received : 04/21/25

Requested by:

FINAL

Patient Name: CP/S/PENNSYLVANIA, 3239

DOB:

Age:

Sex:

Ord. Comm: 54707, BASE - 13 Clearance wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 6					
Dust Wipe 6	*<45			ug/sq.ft.	04/21/25 17:09
Width	*2.00			in.	04/21/25 17:09
Length	*8.00			in.	04/21/25 17:09
Sample 7					
Dust Wipe 7	*<5.0			ug/sq.ft.	04/21/25 17:09
Width	*12.00			in.	04/21/25 17:09
Length	*12.00			in.	04/21/25 17:09
Sample 8					
Dust Wipe 8	*<45			ug/sq.ft.	04/21/25 17:09
Width	*2.00			in.	04/21/25 17:09
Length	*8.00			in.	04/21/25 17:09
Sample 9					
Dust Wipe 9	*7.8			ug/sq.ft.	04/21/25 17:09
Width	*12.00			in.	04/21/25 17:09
Length	*12.00			in.	04/21/25 17:09
Sample 10					
Dust Wipe 10	*<45			ug/sq.ft.	04/21/25 17:09
Width	*2.00			in.	04/21/25 17:09
Length	*8.00			in.	04/21/25 17:09

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

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 : Z2210000

LRN : 0000325395

Auxiliary ID : 54707

Date Collected: 04/21/25

Date Received : 04/21/25

Requested by:

FINAL

Patient Name: CP/S/PENNSYLVANIA, 3239

DOB:

Age:

Sex:

Ord. Comm: 54707, BASE - 13 Clearance wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 11					
Dust Wipe 11	*<5.0			ug/sq.ft.	04/21/25 17:09
Width	*12.00			in.	04/21/25 17:09
Length	*12.00			in.	04/21/25 17:09
Sample 12					
Dust Wipe 12	*<5.0			ug/sq.ft.	04/21/25 17:09
Width	*12.00			in.	04/21/25 17:09
Length	*12.00			in.	04/21/25 17:09
Sample 13					
Dust Wipe 13	*<5.0			ug/sq.ft.	04/21/25 17:09
Width	*12.00			in.	04/21/25 17:09
Length	*12.00			in.	04/21/25 17:09

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

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 : Z2210000

LRN : 0000325395

Auxiliary ID : 54707

Date Collected: 04/21/25

Date Received : 04/21/25

Requested by: [REDACTED]

FINAL

Patient Name: CP/S/PENNSYLVANIA, 3239

DOB:

Age:

Sex:

Ord. Comm: 54707, BASE - 13 Clearance wipes

Lead in Dust Wipes

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

Test Method

*see below

04/21/25 09:46

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

Lab No. _____

H-3044 Lead Dust Sample Collection and Results

Date 4/21/25

inspector

☐ HUD ☒ Base ☐ CDBG

	Last Name	First Name	Phone
Owner's Name			
Contractor			

Street No.	Street Name	Apt. No.	City	Zip Code
3239	S. Pennsylvania Ave		Milwaukee	53207

☐ Prewipe ☒ Clearance ☐ Interim ☐ Re-Wipe

[illegible]

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 4-21-2025

Analyst_

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 : Z2210001

LRN : 0000325395

Auxiliary ID : 54705

Date Collected: 04/21/25

Date Received : 04/21/25

Requested by:

FINAL

Patient Name: CP/S/PENNSYLVANIA, 3239

DOB:

Age:

Sex:

Ord. Comm: 54705, BASE - 14 Clearance wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
COLLECTED 04/21/25 07:10 RECEIVED 04/21/25 08:58					

Sample 1

Dust Wipe 1	*<5.0			ug/sq.ft.	04/21/25 17:10
Width	*12.00			in.	04/21/25 17:10
Length	*12.00			in.	04/21/25 17:10

Sample 2

Dust Wipe 2	*<45			ug/sq.ft.	04/21/25 17:10
Width	*2.00			in.	04/21/25 17:10
Length	*8.00			in.	04/21/25 17:10

Sample 3

Dust Wipe 3	*<5.0			ug/sq.ft.	04/21/25 17:10
Width	*12.00			in.	04/21/25 17:10
Length	*12.00			in.	04/21/25 17:10

Sample 4

Dust Wipe 4	*<45			ug/sq.ft.	04/21/25 17:10
Width	*2.00			in.	04/21/25 17:10
Length	*8.00			in.	04/21/25 17:10

Sample 5

Dust Wipe 5	*<5.0			ug/sq.ft.	04/21/25 17:10
Width	*12.00			in.	04/21/25 17:10
Length	*12.00			in.	04/21/25 17:10

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

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 : Z2210001

LRN : 0000325395

Auxiliary ID : 54705

Date Collected: 04/21/25

Date Received : 04/21/25

Requested by:

FINAL

Patient Name: CP/S/PENNSYLVANIA, 3239

DOB:

Age:

Sex:

Ord. Comm: 54705, BASE - 14 Clearance wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 6					
Dust Wipe 6	*<45			ug/sq.ft.	04/21/25 17:10
Width	*2.00			in.	04/21/25 17:10
Length	*8.00			in.	04/21/25 17:10
Sample 7					
Dust Wipe 7	*<5.0			ug/sq.ft.	04/21/25 17:10
Width	*12.00			in.	04/21/25 17:10
Length	*12.00			in.	04/21/25 17:10
Sample 8					
Dust Wipe 8	*<45			ug/sq.ft.	04/21/25 17:10
Width	*2.00			in.	04/21/25 17:10
Length	*8.00			in.	04/21/25 17:10
Sample 9					
Dust Wipe 9	*<5.0			ug/sq.ft.	04/21/25 17:10
Width	*12.00			in.	04/21/25 17:10
Length	*12.00			in.	04/21/25 17:10
Sample 10					
Dust Wipe 10	*<45			ug/sq.ft.	04/21/25 17:10
Width	*2.00			in.	04/21/25 17:10
Length	*8.00			in.	04/21/25 17:10

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

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:

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841 N Broadway Ave
1st Floor
Milwaukee, WI 53202

Order ID : Z2210001

LRN : 0000325395

Auxiliary ID : 54705

Date Collected: 04/21/25

Date Received : 04/21/25

Requested by:

FINAL

Patient Name: CP/S/PENNSYLVANIA, 3239

DOB:

Age:

Sex:

Ord. Comm: 54705, BASE - 14 Clearance wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
Sample 11					
Dust Wipe 11	*47			ug/sq.ft.	04/21/25 17:10
Width	*12.00			in.	04/21/25 17:10
Length	*12.00			in.	04/21/25 17:10
Sample 12					
Dust Wipe 12	*<5.0			ug/sq.ft.	04/21/25 17:10
Width	*12.00			in.	04/21/25 17:10
Length	*12.00			in.	04/21/25 17:10
Sample 13					
Dust Wipe 13	*<5.0			ug/sq.ft.	04/21/25 17:10
Width	*12.00			in.	04/21/25 17:10
Length	*12.00			in.	04/21/25 17:10
Sample 14					
Dust Wipe 14	*<5.0			ug/sq.ft.	04/21/25 17:10
Width	*12.00			in.	04/21/25 17:10
Length	*12.00			in.	04/21/25 17:10

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

CITY OF MILWAUKEE
HEALTH DEPARTMENT

City of Milwaukee-Public Health Laboratories
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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 : Z2210001

LRN : 0000325395

Auxiliary ID : 54705

Date Collected: 04/21/25

Date Received : 04/21/25

Requested by:

FINAL

Patient Name: CP/S/PENNSYLVANIA, 3239

DOB:

Age:

Sex:

Ord. Comm: 54705, BASE - 14 Clearance wipes

Lead in Dust Wipes

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

Test Method

*see below

04/21/25 09:50

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

Date 4-21-25
inspector [REDACTED]

Taken @ 7:10 AM

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 : Z2220003

LRN : 0000325395

Auxiliary ID : 54738

Date Collected: 04/22/25

Date Received : 04/22/25

Requested by:

FINAL

Patient Name: CP/S/PENNSYLVANIAAV, 3239

DOB:

Age:

Sex:

Ord. Comm: Base- RUSH re-wipes- 5 wipes

Lead in Dust Wipes

TEST-NAME	RESULT	AB	NRML-RANGE	UNITS	DATE-TIME
COLLECTED 04/22/25 10:30 RECEIVED 04/22/25 11:48					
Sample 1					
Dust Wipe 1	*<45			ug/sq.ft.	04/22/25 16:56
Width	*2.00			in.	04/22/25 16:56
Length	*8.00			in.	04/22/25 16:56
Sample 2					
Dust Wipe 2	*<5.0			ug/sq.ft.	04/22/25 16:56
Width	*12.00			in.	04/22/25 16:56
Length	*12.00			in.	04/22/25 16:56
Sample 3					
Dust Wipe 3	*<5.0			ug/sq.ft.	04/22/25 16:56
Width	*12.00			in.	04/22/25 16:56
Length	*12.00			in.	04/22/25 16:56
Sample 4					
Dust Wipe 4	*<5.0			ug/sq.ft.	04/22/25 16:56
Width	*12.00			in.	04/22/25 16:56
Length	*12.00			in.	04/22/25 16:56
Sample 5					
Dust Wipe 5	*<5.0			ug/sq.ft.	04/22/25 16:56
Width	*12.00			in.	04/22/25 16:56
Length	*12.00			in.	04/22/25 16:56

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

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 : Z2220003

LRN : 0000325395

Auxiliary ID : 54738

Date Collected: 04/22/25

Date Received : 04/22/25

Requested by: [REDACTED]

FINAL

Patient Name: CP/S/PENNSYLVANIAAV, 3239

DOB:

Age:

Sex:

Ord. Comm: Base- RUSH re-wipes- 5 wipes

Lead in Dust Wipes

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

Test Method

*see below

04/22/25 12:10

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

Lab No. _____

H-3044 Lead Dust Sample Collection and Results

Date 04/22/25

inspector _____

☐ HUD ☒ Base ☐ CDBG

	Last Name	First Name	Phone
Owner's Name	MPS		
Contractor			DUST

Street No.	Street Name	Apt. No.	City	Zip Code
3239	S. Pennsylvania Ave		Milwaukee	53207

☐ Prewipe ☐ Clearance ☐ Interim ☒ Re-Wipe[illegible]

Z2220003 --> URGENT
CP/S/PENNSYLVANIAAV, 3239
Mnn: 0000325395 B#: 0000325395
BASE::
LDUST Dob:



Codes:

Taken @ 10:30 am

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

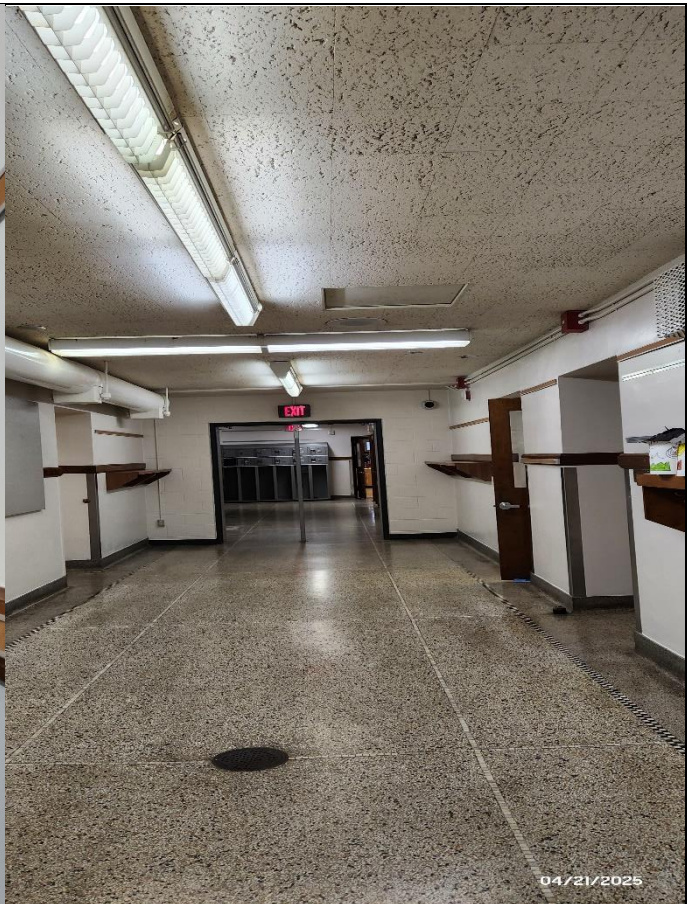
Substrate Type: 1 = Vinyl 2 = Carpet 3 = Wood 4 = Painted Surface 5 = Concrete 6 = Other

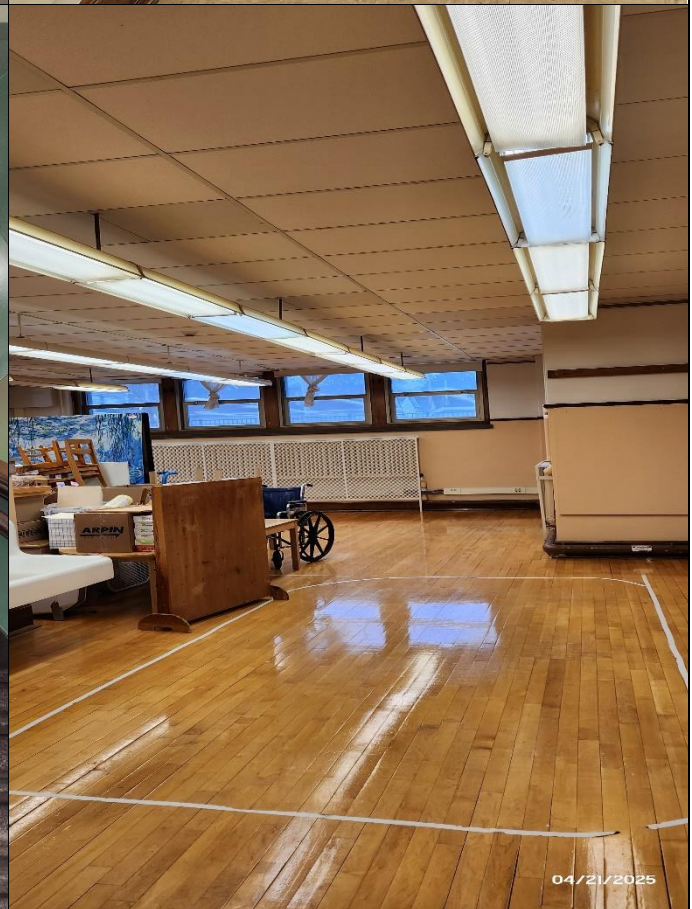
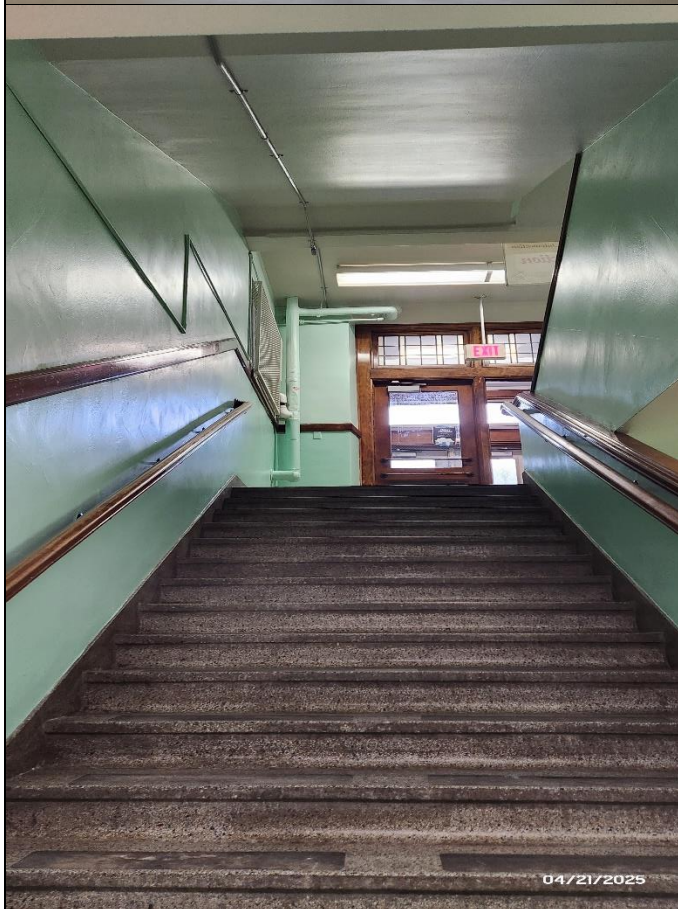
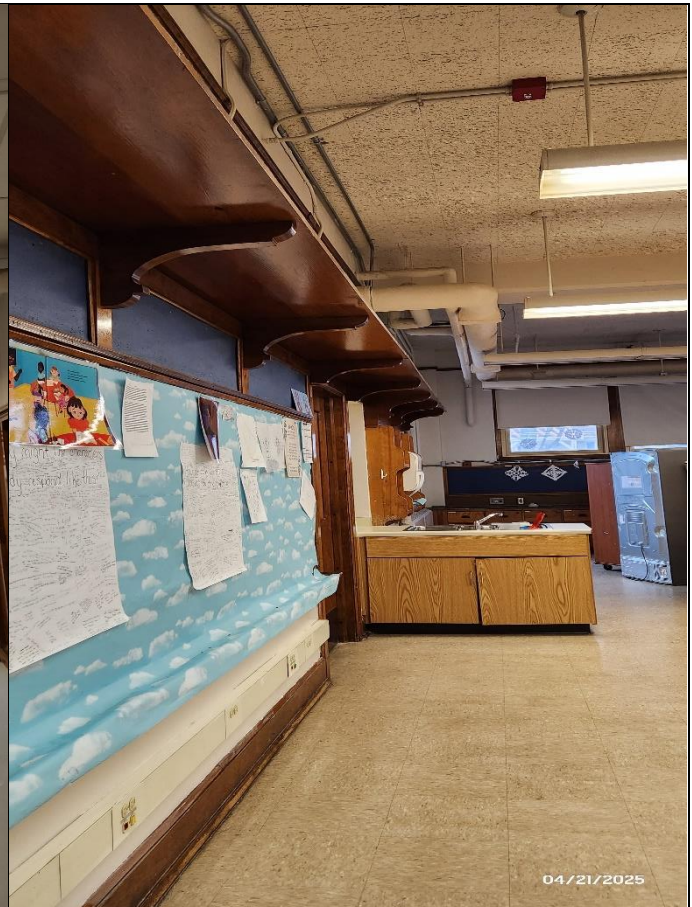
Substrate Condition: 1 = Deteriorated 2 = Moderate 3 = Excellent

Date Reported 4-22-2025

Analyst [REDACTED]

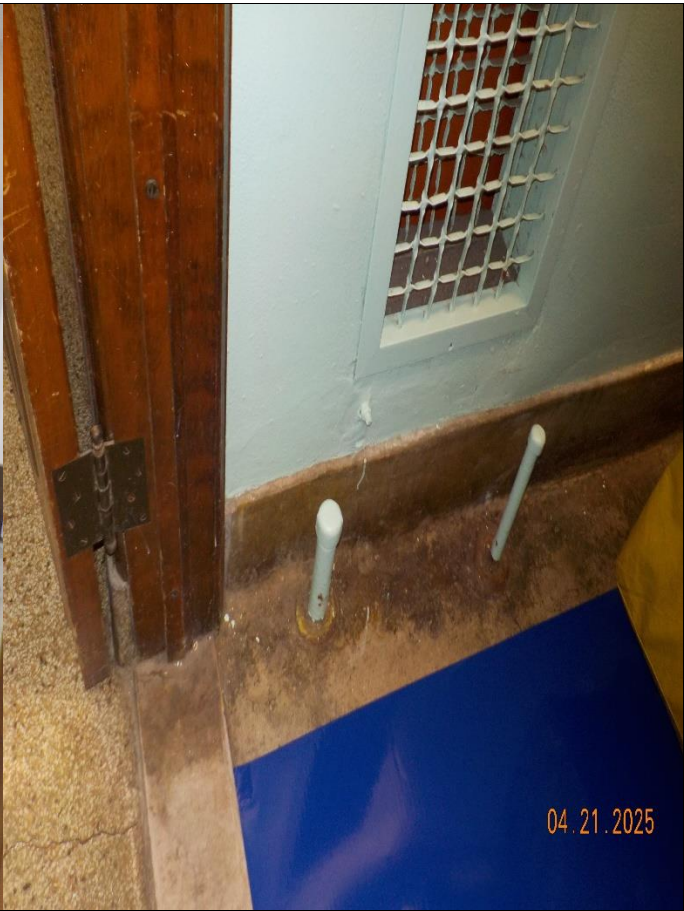
APPENDIX C: Pictures

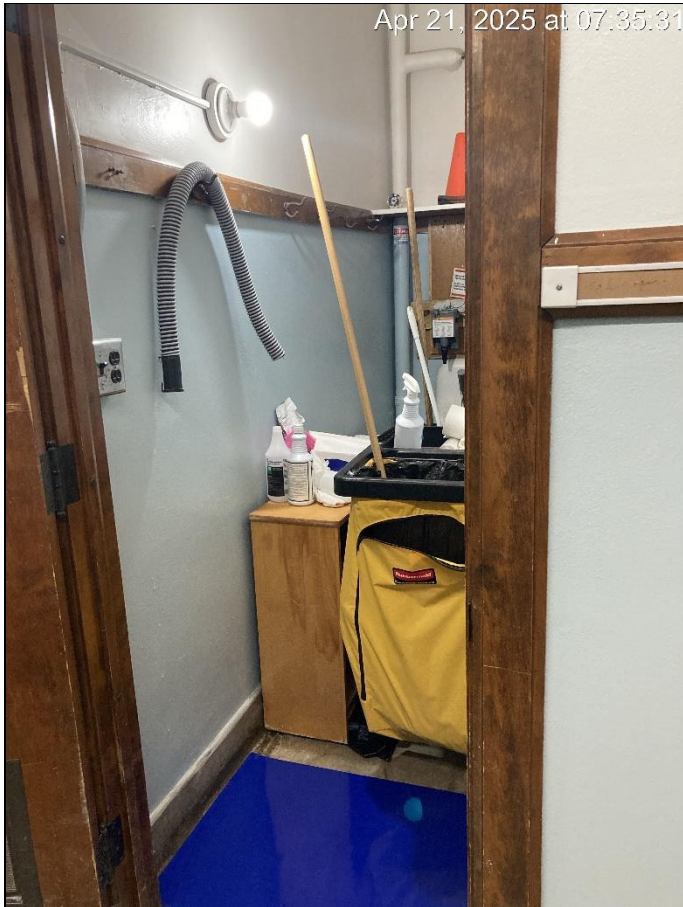


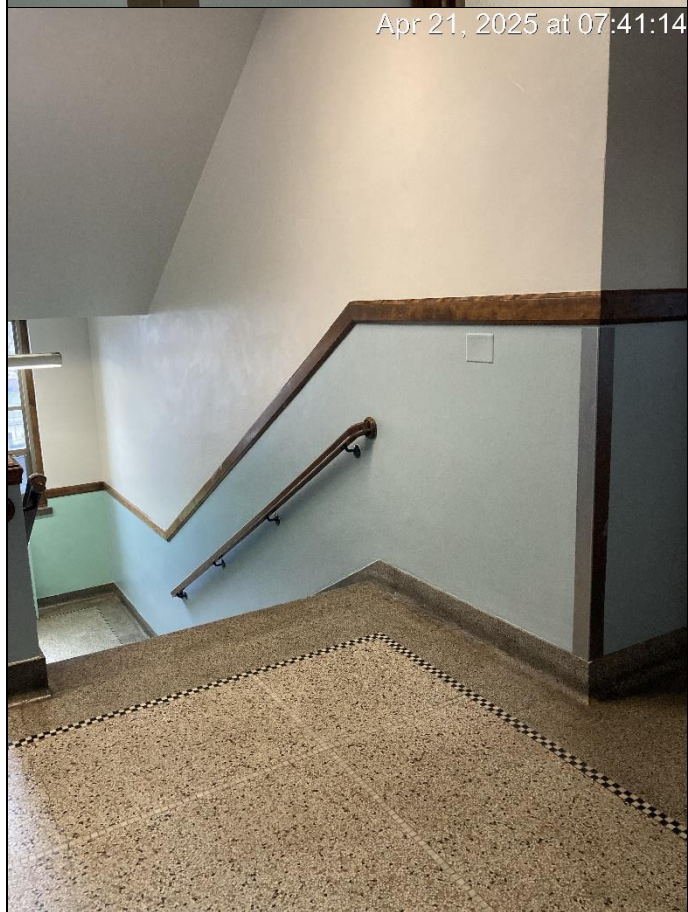




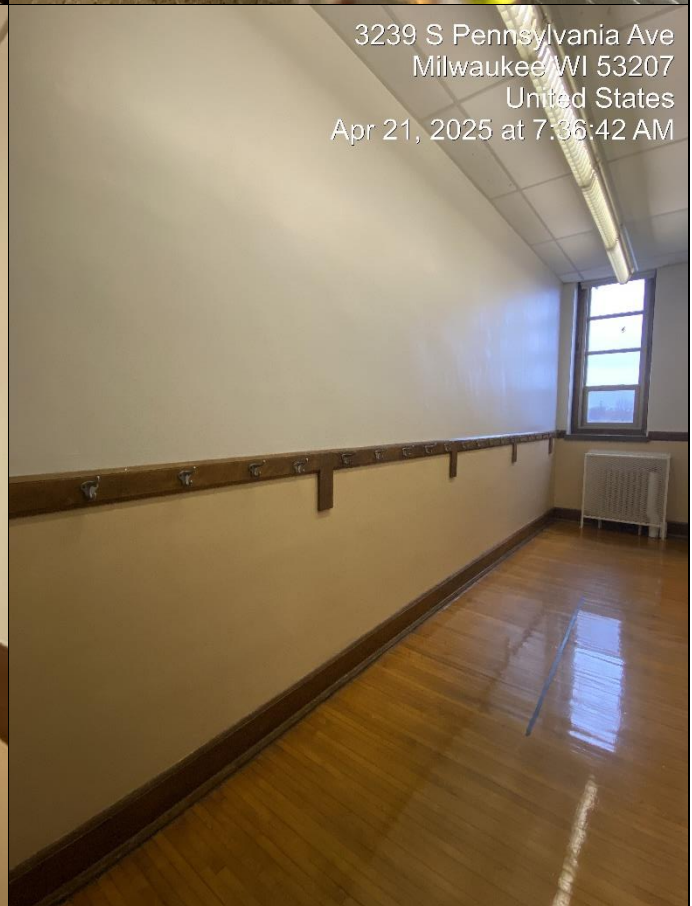
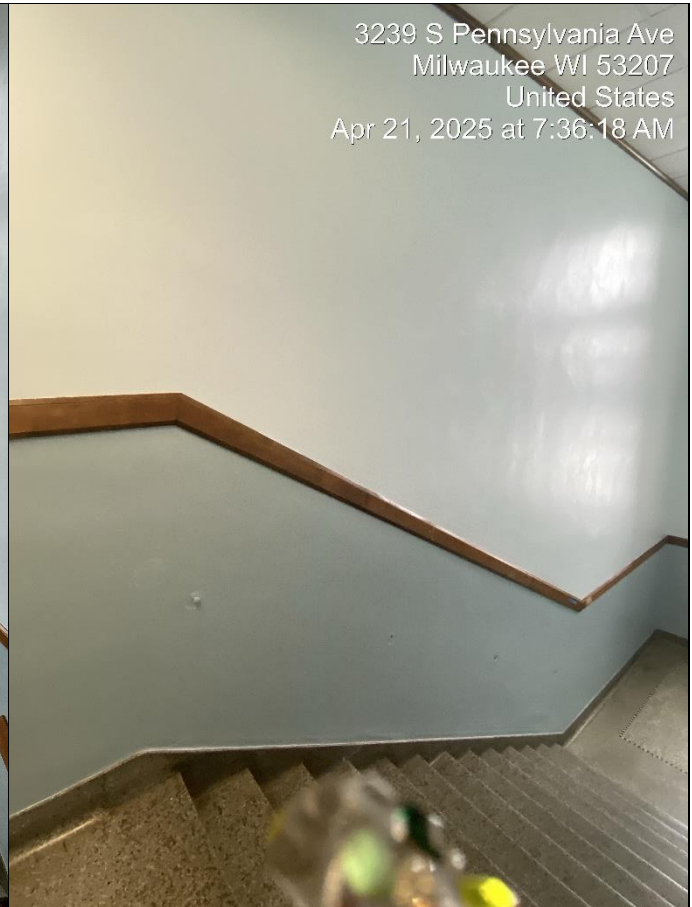


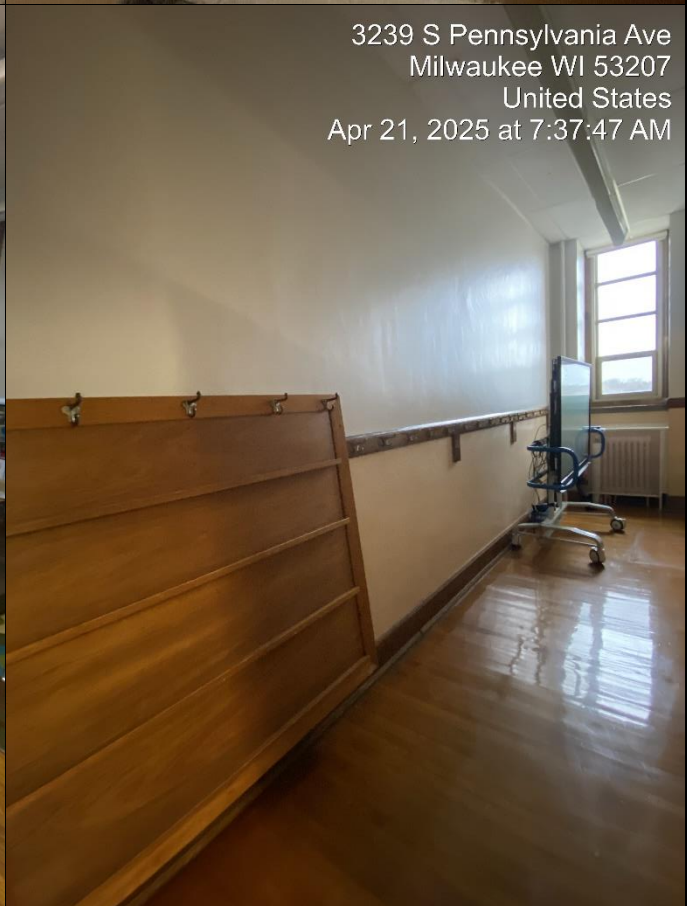
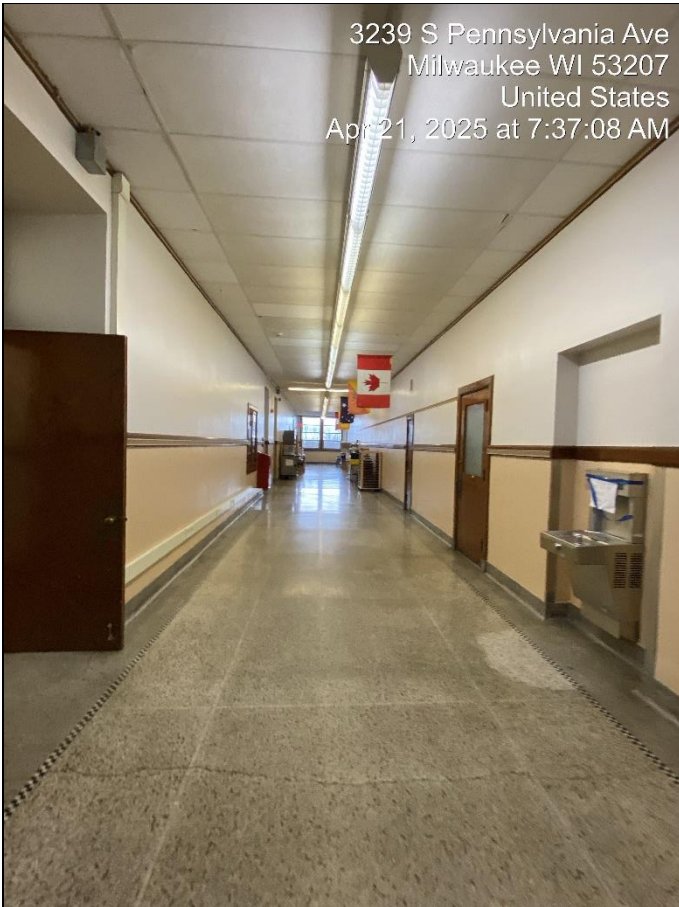


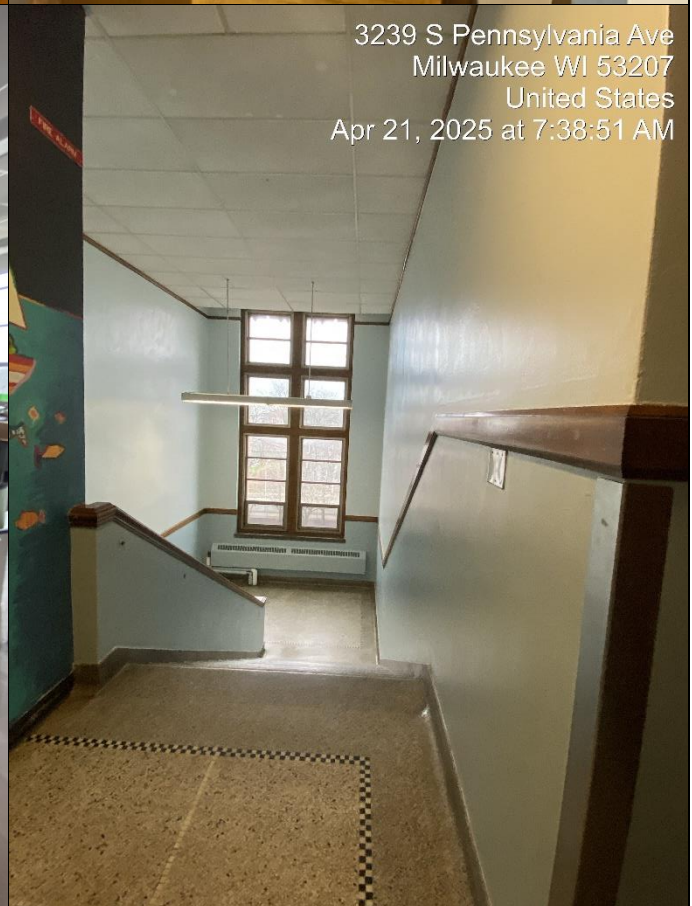
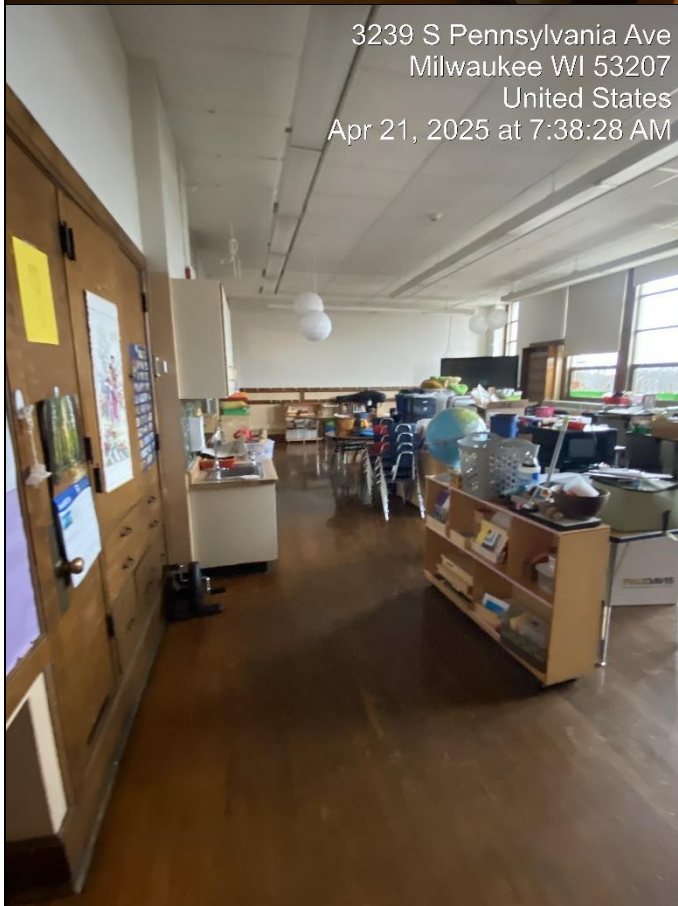












APPENDIX D: Ongoing Monitoring

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