



MULTIFAMILY NW
The Association Promoting Quality Rental Housing

DISCLOSURE OF INFORMATION ON LEAD-BASED PAINT AND/OR LEAD-BASED PAINT HAZARDS



DATE _____ PROPERTY NAME / NUMBER _____

RESIDENT NAME(S) _____

UNIT NUMBER _____ STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

LEAD WARNING STATEMENT: Housing built before 1978 may contain lead-based paint. Lead from paint, paint chips, and dust can pose health hazards if not managed properly. Lead exposure is especially harmful to young children and pregnant women. Before renting pre-1978 housing, lessors must disclose the presence of known lead-based paint and/or lead-based paint hazards in the dwelling. Lessees must also receive a Federally approved pamphlet on lead poisoning prevention.

LESSOR'S DISCLOSURE: (INITIAL) _____

(a) Presence of lead-based paint and/or lead-based paint hazards (check (i) or (ii) below):

(i) Known lead-based paint and/or lead-based paint hazards are present in the housing (explain):

(ii) Lessor has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.

(b) Records and reports available to the Lessor (check (i) or (ii) below):

(i) Lessor has provided the Lessee with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list documents):

(ii) Lessor has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

LESSEE'S ACKNOWLEDGMENT: (INITIAL)

(c) _____ Lessee has received copies of all information listed above.

(d) _____ Lessee has received the pamphlet "Protect Your Family from Lead in Your Home."

AGENT'S ACKNOWLEDGMENT: (INITIAL)

(e) _____ Agent has informed the Lessor of the Lessor's obligations under 42 U.S.C. 4852d and is aware of his/her responsibility to ensure compliance.

CERTIFICATION OF ACCURACY: *The following parties have reviewed the information above and certify, to the best of their knowledge, that the information provided by the signatory is true and accurate.*

X _____ DATE _____ X _____ DATE _____
LESSEE LESSEE

X _____ DATE _____ X _____ DATE _____
LESSEE LESSEE

X _____ DATE _____ X _____ DATE _____
AGENT LESSOR

ON SITE RESIDENT MAIN OFFICE (IF REQUIRED)