Lead Compliance Assurance Report Field Oversight

June 16, 2024 – December 15, 2024

EH&S Lead Oversight Activity Summary June 16, 2024 – December 15, 2024

Introduction

As required by the HUD Agreement, the Environmental Health and Safety Department's ("EHS") Lead Oversight Team ("LOT") performs compliance assurance inspections of NYCHA personnel and vendors conducting Renovation, Repair, and Painting ("RRP") jobs, Lead Abatement, Dust Wipe Clearance activities, Visual Assessments and Risk Assessments to ensure they are in compliance with HUD's Lead Safe Housing Rule, EPA's RRP Rule, and NYCHA's Lead Safe Housing Standard Procedure. LOT also assesses property management's compliance with lead disclosure document requirements and inspects storerooms to monitor the management and inventory of RRP supplies.

When non-compliance is observed, the LOT follows the EHS *Corrective Action and Escalation Protocols*. Guidance is provided to workers when required, and the LOT ensures immediate corrective actions are implemented, i.e. stopping non-compliant activities, notifying supervisors, and making the necessary adjustments to bring the activity into compliance. Additionally, some deficiencies/violations are escalated to the Compliance Department for further action. During this reporting period EHS identified twenty-one observations requiring escalation to the Compliance Department and/or Lead Hazard Control ("LHC"). Fifteen of these escalations related to missing lead-disclosure documents in the Property Management offices. The escalation reports are attached.

Executive Summary

For the period of June 16, 2024, through December 15, 2024, LOT observed 1,692 leadbased paint evaluation, hazard control, and abatement activities occurring throughout NYCHA's portfolio (lead abatement, RRP, clearance examinations, visual assessment, and risk assessment). In total, the team visited 190 unique developments to perform oversight of these jobs. LOT assessed lead disclosure document ("LDD") compliance and RRP supply management at 151 unique developments. Additionally, during this reporting period 69.48% of the RRP jobs LOT observed were in units with a child under 6 ("CU6"), 44.04% of clearance jobs observed were also in a unit flagged as CU6, while only 17.71% of observed lead abatement jobs were in these units. As a result of LOT's oversight, 1 RRP job, and 5 abatement jobs were escalated to the Compliance Department and LHC for further review and action because of the observed non-compliance. Fifteen (15) developments failed both their initial lead disclosure document inspections and reinspection, requiring escalation to the Chief Compliance Officer. All escalation reports are attached in the appendix of this report.

During this reporting period there was a notable decrease in the lead disclosure compliance rate. The compliance rate during this reporting period was 64.73%; the previous reporting period the compliance rate was 85.32%. LOT continues to observe that the smaller consolidations have a lower compliance rate than the managing developments. Of the 15 Page | 1

locations escalated to the Compliance Department for failing both initial and follow-up LDD inspections this period, 8 were smaller consolidations. As shared in the previous 6-month report, this has resulted in a decrease in the overall LDD compliance rate as LOT has focused efforts on assessing these locations. In the 2024 EHS Quarterly Report for Q2, it was recommended that NYCHA modify and provide training on the completion of NYCHA Form 060.275, Disclosure of Information on Lead Based Paint as this form was consistently observed to be inaccurately completed or missing. This recommendation was not fully accepted as changes to the process for completing from this modification, focused training and guidance on the completion of this form will be beneficial for Property Management staff. In early 2025 IT enhancements will be made to EHS' lead disclosure and tenant folder review checklists to further improve compliance monitoring and documentation of results in this area.

Since last year's June – December 2023 reporting period, LOT continues to observe a steady increase in the compliance rate for the accurate completion of the RRP enforcement question-"Are you performing RRP Work". During that reporting period LOT observed an 82.11% compliance rate in this area. For the December 2023- June 2024 period the compliance rate was 88.73%, and for this current 6-month period it is now at 90.76%. Continuously educating workers onsite and bringing the issue to the attention of supervisory and leadership staff may be helping to drive this improvement. EHS will continue to monitor this trend.

In the previous 6-month report, EHS observed an increase in visual assessment jobs that were flagged as needing to be reviewed by LHC. It has since been noted that some flags have been a result of an IT issue, while others were recently identified as stemming from enhancements to the Visual Assessment work orders where fields that were optional for LHC staff were treated as mandatory by the LOT personnel conducting QA. In 2025 LHC will be coordinating a visual assessment training session with EHS to ensure EHS is fully aware of LHC's visual assessment protocols and will make any necessary adjustments to the oversight process as needed. A similar exercise will occur for risk assessments.

Field Oversight Activity	# Observations	Total Compliance Rate	# of Jobs Escalated to Compliance
Storeroom Inspection	188	90.43%	0
Management Office Lead Disclosure Review	207	64.73%	15
Tenant Folder Review	183	63.93%	0
RRP	249	88.35%	1
Lead Abatement	175	94.29%	5

June 16, 2024 – December 15, 2024

Field Oversight Activity	# Observations	Total Compliance Rate	# of Jobs Escalated to Compliance
Post-RRP Clearance	163	98.77%	0
Post-Lead Abatement Clearance	139	100%	0
Visual Assessment QA In-Unit	209	N/A	0
Risk Assessment In-Unit	74	N/A	0
Risk Assessment Common Area	56	N/A	0
Risk Assessment Exterior Area	37	N/A	0

	June 16, 2024 – December 15, 2024				
Task/Area Assessed	# Inspections Completed	#Failed Inspections	Compliance Rate (%)		
Storeroom Inspections	188	18	90.43%		
Property Management Lead Disclosure Files	207	73	64.73%		
Tenant Folder Review	183	66	63.93%		

A. Storeroom & Lead Disclosure Compliance

Notes:

• A data quality review identified thirteen (13) Storeroom/Lead Disclosure Oversight Inspection with data entry errors, resulting in discrepancies between this report and Maximo/Data Warehouse. All data discrepancies were reconciled in this report and documented in a discrepancy log with detailed explanations. The discrepancy detail is available upon request.

	June 16, 2024 – December 15, 2024				
Task/Area Assessed	# Observations	Deficiencies	Compliance Rate (%)		
RRP Work Verification by Personnel (<i>Staff Response to "Are</i> <i>you Performing RRP?"</i>)	249	23	90.76%		
NYCHA Form 060.632, The Lead-safe Certified Guide to Renovate Right	249	5	97.99%		
NYCHA Personnel Certifications	373	0	100%		
Vendor Personnel Certifications	0	0	N/A		
Signage	249	6	97.59%		
Worksite Preparation	134	2	98.51%		
Work Activities	148	1	99.32%		
Cleanup Activities	55	0	100%		
Cleanup Verification	74	0	100%		

B. Renovation, Repair and Painting ("RRP") Compliance

Notes:

• A data quality review revealed zero (0) RRP oversight inspections with data entry errors.

	June 16, 2024 – December 15, 2024				
Task/Area Assessed	# Observations	Deficiencies	Compliance Rate (%)		
Occupant Protection Plan	175	2	98.86%		
Signage	175	0	100%		
EPA Notice of Commencement	175	3	98.29%		
Lead Abatement Workers (NYCHA)	49	0	100%		
Lead Abatement Workers (Vendor)	285	0	100%		
Lead Abatement Supervisor	175	4	97.71%		
Work Area Preparation & Containment	51	0	100%		
Work Activities	67	2	97.01%		
Cleanup Activity	72	0	100%		

C. Lead Abatement Compliance

Notes:

Due to an IT issue, work order 120092155, which was actually completed on February 1, 2024, was incorrectly logged as having been completed on July 1, 2024, and was not available to EHS via the Data Warehouse report until August 2024. As a result, this inspection was omitted from the prior certification but was included in the LCAP-20 report. For reporting continuity, while the inspection did not actually occur during the reporting period covered in this certification, we are including the inspection findings in this certification.

	June 16, 2024 – December 15, 2024				
Tasks/Areas Assessed	# Observations	Deficiencies	Compliance Rate (%)		
Timing between cleanup completion and clearance examination	302	0	100%		
NYCHA Personnel Certifications	165	2	98.79%		
Vendor Personnel Certifications	137	0	100%		
Visual Inspection	302	1	99.67%		
Sample Collections	278	0	100%		

D. Clearance Examinations Compliance

NYCHA Certified Personnel						
Type of Certified Personnel	Post RRP	Post Abatement				
Dust Wipe Technician	132	0				
Certified Risk Assessor	0	1				
Lead-Based Paint Inspector	11	21				

Vendor Certified Personnel

Type of Certified Personnel	Post RRP	Post Abatement
Dust Wipe Technician	3	0
Certified Risk Assessor	9	58
Lead-Based Paint Inspector	8	59

Notes:

• A data quality review revealed zero (0) dustwipe clearance inspections with data entry errors.

E. Visual Assessment Quality Assurance (QA)

Inspection	# Observations	# Requiring LHC Review/Re-assessment
Visual Assessment QA In-Unit	209	1
Visual Assessment QA Common Area*	0	0

*LHC did not perform any Common Area Visual Assessment during this reporting period.

F. Risk Assessment Oversight

Inspection	# Observations	# Requiring LHC Review/Re-assessment
Risk Assessment In-Unit	74	3
Risk Assessment Common Area	56	5
Risk Assessment Exterior Area	37	0

Exhibit A: RRP Escalation Report (June 16, 2024 – December 15, 2024)



EHU OVERSIGHT ESCALATION REPORT					
1. VENDOR or NYCHA PERSONNEL?	(if Vend	DOR/NAME(S) OF NYCHA PERSONNEL for also indicate company name) SUNII Bicano 82270	3. TYPE OF JOB		4. EHS INSPECTION WO# 129128742
NYCHA	Ve	ermont Sykes 77956			^{5. см wo#} 127476667
6. ADMINSTERING DEPARTMENT		7. DEVELOPMENT:	•	8. OBSERVA	TION ADDRESS
Manhattan Borough		Wald Houses	30 Avenue D, Apt 2G New York, NY 10009		
9. INCIDENT DESCRIPTION:					
 INCIDENT DESCRIPTION: On 8/15/2024 at 11:01am LOTS John Ospina performed an inspection of RRP work at the above location. Upon arrival, the painters were not present, however the resident provided access to the wor area. LOTS Ospina observed that the floor in the bathroom was inadequately covered, there were pai chips on the floor, there was no containment of the work area entrance and items in the work area we not covered. LOTS Ospina contacted the painters Sunil Bicano and Vermont Sykes, who arrived shor after. They stated that they are not required to cover the floor. Additionally, they did not select the RR job on their handheld. LOTS Ospina educated the workers on the the requirements as per the SP. As per the NYCHA Lead Safe Standard Procedure 050:20:1 for RRP jobs: Setting up- 10.b.(1).(d).(e).(g).(i). Apartments; Cover all items which were not moved from work area with one layer of disposable polyethylene sheeting. The sheeting must be taped together with duct tape; and taped to the floors or bottom of the walls or baseboards; to form a continuous barrier preventing the penetration of dust. Cover the floor of the work area with one layer of six-mil milliliter disposable polyethylene sheeting and tape the sheeting down to prevent movement. The floor sheeting must be extended six (6) feet in all directions from the work area where practical; unless vertical containment is installed. Use two layers of sheeting to cover wall-to-wall carpeting; overlapping the seams by at least six (6) inches. 				ded access to the work vered, there were paint s in the work area were kes, who arrived shortly did not select the RRP nts as per the SP. er of disposable taped to the floors or enetration of dust. ethylene sheeting and rea where practical;	
10. CORRECTIVE ACTION TAKEN:					
(Describe what was done after you observed the deficiency, was this reported to the job supervisor, were the corrective actions implemented, did you remain onsite to see completion?)					he corrective actions
LOTS Ospina notified the painter's supervisor, Mustafa Mattry regarding the deficiencies found at the work location. LOT Specialist Ospina instructed the painters to make the necessary corrections to the deficiencies observed. They complied by properly removing the paint chips, placing adequate plastic sheeting on the bathroom floor, plastic on items not removed from the work area and enclosing the doorway to the work area.			ary corrections to the ing adequate plastic		



11. PHOTOS:				
			No.	
12. EHS PERSONNEL/EHS VENDOR				
John Ospina				
NAME:		DATE & TIME OF OBSERVA		
John Ospina		8/15/202	24	
13. ADDITIONAL INFORMATION (provide any other	er information that ma	y be of importance)		
Maximo Work Order:				
Maximo work Order.				

Exhibit B: Lead Abatement Escalation Report (June 16, 2024 – December 15, 2024)



EHU OVERSIGHT ESCALATION REPORT						
1. VENDOR of NYCHA PERSONNEL? Vendor	(if Ven	DOR/NAME(S) OF NYCHA PERSONNEL dor also indicate company name) York Environmental Services	Lead Abatemen		4. EHS INSPECTION WO# 127828027 5. CM WO# 122645839	
6. ADMINSTERING DEPARTMENT		7. DEVELOPMENT:		8. OBSERVA	TION ADDRESS	
Lead Hazard Control LHC	;	Smith Houses		46 Madis	46 Madison Street, Apt 6D, New York NY 10038	
9. INCIDENT DESCRIPTION:						
9. INCIDENT DESCRIPTION: On 6/25/2024 during an oversight inspection of lead abatement work at Smith Houses; EH&S Lead oversight team specialist (LOTS) John Ospina and LOTA Samuel Awelewa observed the following violation at 11:17 AM: Abatement workers from NYES were performing abatement preparation work activities and the abatement supervisor was not on-site. Upon inquiry, the workers stated that the abatement supervisor went to another site. LOTS/LOTA were able to speak to the abatement supervisor, Petro Khalos on the phone and he stated that he went to Baruch Houses to supervise another three (3) abatement jobs and he will be back in 20 minutes. While LOTS/LOTA were waiting; the abatement workers left the work area to take their lunch break. The deficiency violates a section of NYCHA Lead Safe Standard Procedure as follows: SP050201-Lead Safe Standard Procedure Section i(1).(b)i Performing an Abatement Page 60 (1) Personnel (b). A certified Abatement supervisor must be on-site during all work area preparation. The certified abatement supervisor confirms they are on-site by entering the actual start time in Maximo.						
10. CORRECTIVE ACTION TAKEN: (Describe what was done after you observed the deficiency, was this reported to the job supervisor, were the corrective actions implemented, did you remain onsite to see completion?)						
LOTS instructed the workers to stop the worksite preparation and containment activity until the lead abatement supervisor arrived on-site. The workers complied with the directive and LOTS waited onsite to ensure compliance. The abatement supervisor, Petro Khalos, arrived on-site a half hour later. LiRo Consulhtant John Lluvera who was assigned to this job and NYCHA Lead Hazard Control Department (LHC) Inspector Alenxandros Simantiras were not onsite at the time of the inspection. LOTS contacted both individuals via a phone call and notified them about this deficiency.						



11. PHOTOS:					
12. EHS PERSONNEL/EHS VENDOR		-			
John Ospina					
NAME:	DATE & TIME OF OBSERVA				
John Ospina 06/25/2024 11:17 AM					
13. ADDITIONAL INFORMATION (provide any oth	er information that may be of importance)				



EHU OVERSIGHT ESCALATION REPORT						
1. VENDOR or NYCHA	2 VEN	DOR/NAME(S) OF NYCHA PERSONNEL	3. TYPE O	F JOB	4. EHS INSPECTION WO#	
PERSONNEL?		dor also indicate company name)	Lead Abatement		129587939	
VENDOR	Pedr	o Romero	Leau Abatement		5. CM WO#	
Abatement Unlimited INC						
					126770409	
6. ADMINSTERING DEPARTMENT		7. DEVELOPMENT:	8. OBSERV		ATION ADDRESS	
Lead Hazard Control (LH	C)	Sotomayor Houses		1815 Bru	ckner Boulevard , #2D	
				Bronx, N	Y 10472	
9. INCIDENT DESCRIPTION:						
					ed Outersight Taxas Canadalist	
		an observation of lead abatement work a following: a lead abatement worker from				
		ining the work area. He was performing				
observation and had neglected to	do the f	ollowing:				
1. Cover resident belongings in the	e livina i	room in order to prevent dust that escape	d from the	work area fro	m settling on the furniture and	
other belongings.	e nving i	commoder to prevent dust that escape	a nom me	work area no	in setang on the familare and	
Cover hallway closet which is a	djacent	to bathroom work area.				
3. Cover hallway entrance leading	to othe	r rooms in the unit.				
The deficiencies violates a section	of NYC	HA Lead Safe Standard Procedure as fo	ollows:			
SP050201-Lead Safe Standard Pr Section.VII.H.(5) - Setting Up - pa						
(b) Work Area Preparation: ii. Cover all items which were not moved from the work area with one layer of six-mil disposable polyethylene sheeting. The sheeting must be taped together with duct tape and taped to the floors or bottom of the walls or baseboards, to form a continuous barrier to the penetration of dust.						
iv. Cover all doorways in the work area, including the work area entrance or vertical containment doorway, with one layer of six-mil disposable polyethylene sheeting. Tape the sheeting to the top of the door frame or vertical containment high point and weigh down the bottom to create a seal. Create a door flap on the sheeting that allows access into the work area.						
10. CORRECTIVE ACTION TAKEN:						
(Describe what was done after yo implemented, did you remain onsi		ved the deficiency, was this reported to the e completion?)	ne job super	rvisor, were ti	he corrective actions	
LOTS contacted Liro Proj	ect Ins	spector, Richard Sekkor assign	ed to mo	nitor Lead	d abatement projects at	
this location and informed	l him a	bout the observed deficiencies	s. He can	ne to site a	and observed for	
himself the deficiencies ci	ted at	ove. LOTA, Samuel Awelewa	was cont	tacted and	he advised for the job	
	to be flagged and for LOTS to stay on site until the observed deficiencies were corrected. The LOTA					
informed LHC lead abatement unit about the incident.						
Abatement Supervisor, R	omero	complied with LOTS directive	to adequ	ately cont	tain the work area, he	
erected vertical containments to cover resident belongs in the living room, covered the hallway closet by						
the bathroom, and covered the hallway entrance while EHS was on site.						



11. PHOTOS:		
12. EHS PERSONNEL/EHS VENDOR NAME: Chibu Nwobodo 13. ADDITIONAL INFORMATION (provide any oth	DATE & TIME OF OBSERVA 09/05/2024 (er information that may be of importance)	(@ 13:05 hrs



EHU OVERSIGHT ESCALATION REPORT						
1. VENDOR or NYCHA PERSONNEL?	(if Ven	DOR/NAME(S) OF NYCHA PERSONNEL dor also indicate company name) e Control Abatement	Lead Abatement 12		4. EHS INSPECTION WO# 129770490	
VENDOR	Amulf	o Balanta, Abatement Worker F. Tantajulca, Abatement Supervisor			^{5. см wo#} 111150840	
6. ADMINSTERING DEPARTMENT		7. DEVELOPMENT:		8. OBSERVA	TION ADDRESS	
Lead Hazard Control (LH	C)	Red Hook West	135 Richards Street, 6B Brooklyn, NY 11231			
9. INCIDENT DESCRIPTION:						
Nwobodo observed a lead abateme without adequately containing the w had neglected to do the following:	nt worke ork area	of lead abatement work at Red Hook West r, Amulfo Balanta, from Empire Control Aba . The worker was performing paint removal n order to prevent dust that escaped from t	atement perf work in the	orming lead al bathroom at th	batement related activities ne time of the observation and	
2. Cover hallway floor with 6-mil pol	yethylen	e sheeting to prevent tracking dust as they	move back a	and forth durin	g the abatement process.	
3. Cover hallway entrance with verti	cal conta	inment in order to isolate the work area fro	m other room	ms in the unit.		
The deficiencies violates a NYCHA	s Lead S	afe Standard Procedure as follows:				
SP050201: Lead Safe Standard Pro Section VII.H.(5) - Setting Up - page		:				
 (b) Work Area Preparation: ii. Cover all items which were not moved from the work area with one layer of six-mil disposable polyethylene sheeting. The sheeting must be taped together with duct tape and taped to the floors or bottom of the walls or baseboards, to form a continuous barrier to the penetration of dust. 						
iii. Cover the floor of the work area with one layer of six-mil disposable polyethylene sheeting and tape the sheeting down to prevent movement. The floor sheeting must extend six feet in all directions from the work area where practical, unless vertical containment is installed.						
iv. Cover all doorways in the work area, including the work area entrance or vertical containment doorway, with one layer of six-mil disposable polyethylene sheeting. Tape the sheeting to the top of the door frame or vertical containment high point and weigh down the bottom to create a seal. Create a door flap on the sheeting that allows access into the work area.						
10. CORRECTIVE ACTION TAKEN: (Describe what was done after you observed the deficiency, was this reported to the job supervisor, were the corrective actions implemented, did you remain onsite to see completion?)						
LOTS informed Liro Project Inspector Brian Kogan, who is assigned to monitor lead abatement projects at this location, about the deficiencies. He came to site and observed for himself the deficiencies cited above. LOTA Samuel Awelewa was contacted and he advised for the job to be flagged and for LOTS to stay on site until the observed deficiencies were corrected. LOTA informed the LHC Lead Abatement Unit about the incident.						
Abatement Supervisor Doris Tantajulca complied with LOTS directive to properly contain the work area. She erected a vertical containment to isolate the work area from the other rooms, covered hallway floor with 6-mil polyethylene, and added a longer flap on the door covering to create a better seal while EHS was on site.						



11. PHOTOS:		
12. EHS PERSONNEL/EHS VENDOR		
NAME:	DATE & TIME OF OBSERVA	
Chibu Nwobodo		@ 11:35 hrs
13. ADDITIONAL INFORMATION (provide any oth	er information that may be of importance)	



EHU OVERSIGHT ESCALATION REPORT						
1. VENDOR or NYCHA PERSONNEL? Vendor - NYES	(if Ven	DOR/NAME(S) OF NYCHA PERSONNEL dor also indicate company name) INA R. Leon	3. TYPE OF JOB Lead Abatement		4. EHS INSPECTION WO# 131334916 5. CM WO# 128627369	
6. ADMINSTERING DEPARTMENT Lead Hazard Control (LHC	C)	7. DEVELOPMENT: LaGuardia	240 Mad		tion address ison Street, #04C k, NY 10002	
entering the actual start time in Maximo. 10. CORRECTIVE ACTION TAKEN: (Describe what was done after you observed the deficiency, was this reported to the job supervisor, were the corrective actions implemented, did you remain onsite to see completion?) LHC Project Inspector Neirami Sourena, assigned to monitor the vendor at this location, was with LOTS and instructed the workers to stop work and wait for their Supervisor to arrive at the worksite. LOTA, Samuel Awelewa was contacted, and he advised that the job must be flagged for the observed deficiency and that an escalation memo must be submitted. The abatement workers was instructed to stop further containment set-up activity until a Lead Abatement Supervisor arrived on site, and they complied with the directive. Abatement Supervisor Adriana Leon arrived on site about half an hour later, and work resumed without further delay.						



11. PHOTOS:					
12. EHS PERSONNEL/EHS VENDOR	-	•			
NAME:	DATE & TIME OF OBSERVA				
Chibu Nwebodo 11/21/2024 @11:05 AM					
13. ADDITIONAL INFORMATION (provide any oth	er information that may be of importance)				



	EHU	OVERSIGHT ESCALAT	ION RE	PORT		
1. VENDOR or NYCHA PERSONNEL? Vendor - AGD	(if Ven	DOR/NAME(S) OF NYCHA PERSONNEL dor also indicate company name) Zej T. Wojcik	Lead Abatement 131388095 5. CM WO#		4. EHS INSPECTION WO# 131388095 5. CM WO# 129758053	
6. ADMINSTERING DEPARTMENT Lead Hazard Control (LH	C)	7. DEVELOPMENT: Douglass Houses	uglass Houses 825 Co		ATION ADDRESS IMDUS AVENUE, #17G k, NY 10025	
(LOTŠ) Chibuzor Nwobodo ob A lead abatement worker from abatement supervisor being or inquiry, the worker stated that speak to the abatement supen complete an ongoing job and v to stop further work until he an The deficiency violates a sectiv SP050201-Lead Safe Standam Section VII.H.i.1(b).i Performin i. Performing an Abatement (1) Personnel (b) A certified abatement supe i. Must be on site during all wo	served AGD v n site. 1 the aba visor, A would n rives ba on of N d Proce og an A rvisor: rk area	YCHA Lead Safe Standard Procedu	it 11:25 hr n for lead nent set-up Developn stated tha TS advise	s: abatement r at the time nent for anot t he was at d the supen	related activities without ar of observation. Upon ther job. LOTS was able to another development to	
implemented, did you remain onsi LHC Project Inspector Ne about the observed deficit should be flagged for the abatement worker was ins Supervisor arrived on site	ite to se irami a ency. obser structe ; she	ved the deficiency, was this reported to t e completion?) Sourena, assigned to monitor i LOTA Samuel Awelewa was a ved deficiency and that an esc ed to stop further containment is complied with the directive. LC Wojcik, did not arrive at the w	the vend Iso conta alation m set-up ac DTS waite	or at this lo acted, and nemo shou ctivity until	ocation, was notified he advised that the jo Ild be submitted. The a Lead Abatement	



11. PHOTOS:	
12. EHS PERSONNEL/EHS VENDOR	
NAME:	DATE & TIME OF OBSERVATION:
Chibu Nwobodo	11/25/2024 @11:26hrs
13. ADDITIONAL INFORMATION (provide any othe	r information that may be of importance)

Exhibit C: Lead Disclosure Documents (LDD) Escalation Memos (June 16, 2024 – December 15, 2024)



Environmental Health & Safety Department

To:	Brad Greenburg, Chief Compliance Officer
From:	Patrick O'Hagan, VP Environmental Health and Safety Officer
Date:	July 3rd, 2024
Re:	Lead Disclosure Document Re-Inspection Failures (Quarter 2)

The EH&S Lead Oversight Team (LOT) reviewed the Lead Disclosure Documents at various developments during the months of June 2024. If a development was missing some or all the required documents, the development was re-inspected after approximately 10 business days.

During the review, LOT confirms that hardcopies of the following documents are present in a development's Lead Disclosure binder and placed in the following order:

- Development Disclosure Form
- Executive Summary Report
- Risk assessment Re-Evaluation Report
- List of Units with Individual Unit Disclosure Forms
- These documents must be placed within a Blue 3-Ring Binder

The table below summarizes those developments that failed both the initial inspection and the re-inspection during the months of June 2024. When developments fail the initial inspection the EHS Planning and Logistics Coordinator emails property management the Compliance Department's "Guidance for Lead Disclosure Rule Documentation" which provides them with instructions for retrieving lead disclosure documents to assist them with gathering the required documents.

Development	First Inspection Date	Re-Inspection Date
Clason Point	5/21/2024	6/4/2024
Albany II	6/5/2024	6/20/2024
Adams	5/29/2024	6/25/2024
Millbrook Extension	05/21/2024	06/26/2024
Millbrook	06/04/2024	06/26/2024

In response to these findings of non-compliance, I am requesting that your department initiate appropriate corrective actions against the leadership teams of these locations.

Thank you in advance and please let me know if you have any questions.

1

*Note: Clason Point's failure does not fall within this reporting period.



To:	Brad Greenburg, Chief Compliance Officer	
From:	Patrick O'Hagan, VP Environmental Health and Safety Officer	
Date:	September 4, 2024	
Re:	Lead Disclosure Document Re-Inspection Failures (July 2024)	

The EH&S Lead Oversight Team (LOT) reviewed the Lead Disclosure Documents at various developments during the month of July 2024. If a development was missing some or all the required documents, the development was re-inspected after approximately 10 business days.

During the review, LOT confirms that hardcopies of the following documents are present in a development's Lead Disclosure Binder and placed in the following order:

- Development Disclosure Form
- Executive Summary Report
- Risk assessment Re-Evaluation Report
- List of Units with Individual Unit Disclosure Forms
- · These documents must be placed within a Blue 3-Ring Binder

The table below summarizes those developments that failed both the initial inspection and the re-inspection during the month of July 2024. When developments fail the initial inspection EHS emails property management the Compliance Department's "Guidance for Lead Disclosure Rule Documentation" which provides them with instructions for retrieving lead disclosure documents to assist them with gathering the required documents.

	Development	First Inspection Date	Re-Inspection Date	Failures Noted During Initial and Follow-Up Inspection
-	1162-1176 Washinton Avenue	7/1/2024	7/16/2024	 Lead disclosure documents were not stored in a blue three- ring binder as required. The executive summary report was missing. The most recent biennial risk assessment was not included. The list of units with individual unit

1



Development	First Inspection Date	Re-Inspection Date	Failures Noted During Initial and Follow-Up Inspection
			disclosures was not included. The documents were not organized according to the required format.
Bracetti Plaza	6/18/2024	7/8/2024	The tracking log was not present in the binder.
Two Bridges	6/14/2024	7/1/2024	 The list of units with individual unit disclosures was not included. The tracking log was not present. The documents were not organized according to the required format.
Richmond Terrace	6/13/2024	7/1/2024	The cover page for the document binder was incorrect.
Teller Avenue	7/1/2024	7/16/2024	 Lead disclosure documents were not stored in a blue three- ring binder as required. The executive summary report was missing. The list of units with individual unit disclosures was not included. The documents were not organized

2



Development	First Inspection Date	Re-Inspection Date	Failures Noted During Initial and Follow-Up Inspection
			according to the required format.

In response to these findings of non-compliance, I am requesting that your department initiate appropriate corrective actions against the leadership teams of these locations.

Thank you in advance and please let me know if you have any questions.





To:	Cassiah Ward, Chief Compliance Officer		
From:	Patrick O'Hagan, VP Environmental Health and Safety Officer		
Date:	December 11 th , 2024		
Re:	November Lead Disclosure Document Re-Inspection Failures		

The EH&S Lead Oversight Team (LOT) reviewed the Lead Disclosure Documents at various developments during November. If a development was missing some or all of the required documents, it was re-inspected after approximately 10 business days.

During the review LOT would confirm that hard copies of the following documents are present in a development's Lead Disclosure binder and placed in the following order:

- Development Disclosure Form
- · Executive Summary Report
- Risk Assessment Re-Evaluation Report
- · List of Units with Individual Unit Disclosure Forms
- · These documents must be placed in a Blue 3-Ring Binder

The table below summarizes the developments that failed the first inspection and the follow-up re-inspection during the month of November. When developments fail the first inspection, LOT emails property management the Compliance Department's "Guidance for Lead Disclosure Rule Documentation," which provides instructions for retrieving lead disclosure documents to assist them with gathering the required documents.

Development	First Inspection Date	Re-Inspection Date	Passed Re-Inspection
Glenmore	10/17/2024	11/7/2024	The list of units with individual unit disclosures was missing.
Low	10/17/2024	11/7/2024	 The list of units with individual unit disclosures was missing.
Elliot	10/23/2024	11/14/2024	 The blue three-ring binder cover page was missing. The executive summary report was missing. The biennial risk assessment was missing

1



			The list of units with individual unit disclosures was missing
Brevoort	10/23/2024	11/14/2024	The list of units with individual unit disclosures was missing.
Borinquen Plaza II	10/30/2024	11/19/2024	 The biennial risk assessment was missing. The documents were not organized according to the required format.
Breukelen	10/23/2024	11/27/2024	The list of units with individual unit disclosures was missing.

In response to these findings of non-compliance, I request that your department initiate appropriate corrective actions against the leadership teams of these locations.

Thank you in advance, and please let me know if you have any questions.

2