



Colorado Department  
of Public Health  
and Environment

**LEAD-BASED PAINT ABATEMENT PERMIT APPLICATION FORM**  
**FEE MUST ACCOMPANY THIS FORM**  
**INCOMPLETE APPLICATIONS WILL BE RETURNED**  
 (Permit will be mailed to abatement firm unless specified otherwise)

Submit form with fee to:  
 Colorado Dept. of Public Health and  
 Environment  
 APCD-IE-B1  
 4300 Cherry Creek Drive South  
 Denver, CO 80246-1530

**FEE TABLE:**

Valuation of Work ⇒	\$2,000 or less	\$2,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$500,000	Over \$500,000
Permit Fee ⇒	\$155	\$145 base <i>plus</i> \$8.00 per \$1,000 <sup>†</sup>	\$195 base <i>plus</i> \$7.00 per \$1,000 <sup>†</sup>	\$295 base <i>plus</i> \$6.00 per \$1,000 <sup>†</sup>	\$795 base <i>plus</i> \$5.00 per \$1,000 <sup>†</sup>

<sup>†</sup> in valuation or fraction thereof of total valuation

**ABATEMENT CONTRACTOR:**

**ABATEMENT SITE:**

Company Name	Building Name (if applicable)
Street	Specify where work will take place (e.g. floor, room wing, etc.)
City State Zip	Street
Telephone Colorado company license number	City County Zip
Project Supervisor Colorado cert. number	Building telephone Contact Person

**DISPOSAL SITE:**

**BUILDING OWNER OR OPERATOR:**

Landfill Name	Owner's Name
Street	Street
City State Zip	City State Zip
Telephone	Telephone Colorado company license number

**OCCUPANT PROTECTION PLAN AND FINAL CLEARANCE:**

Occupant Protection Plan Preparer (please type or print)	This box for CDPHE Use Only	Calculated Fee:
Telephone Colorado Certification Number		Permit #:
Final Clearance Inspector/Risk Assessor Name (please type or print)	Check #:	Postmarked for HD:
Telephone Colorado Certification Number		Issued:
Site Inspector/Risk Assessor Name (please type or print)	Start Date: _____	End Date: _____
Telephone Colorado Certification Number	Start Time: _____ AM / PM	Quit Time: _____ AM / PM
	Amount of LBP: _____ SF	Days of Operation (circle):
	Proj. Valuation: \$ _____	Sun M Tu W Th F Sat
	Permit Fee: _____ (see fee table above) [code 710]	Target Housing? Y N
		Child-Occupied Facility? Y N
		Emergency Project? Y N

Attach the Occupant Protection Plan to this application. (See page 2 side for guidelines)

# Air Pollution Control Division

## Lead-based Paint

### Occupant Protection Plan Guidelines

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As per Regulation No. 19, Part A, Section V.A.6., occupant protection plans must contain, at a minimum, the following information. Follow the outline below when developing the occupant protection plan.

1. Project Title  
Address  
City, ST Zip
2. Abatement contractor  
Address  
City, ST Zip
3. Discuss whether or not occupant relocation is necessary during abatement and why or why not.
4. Describe, in detail, the scope of work for the project. Include types and amounts of material to be abated. Submit a floor plan or drawing of the project location. Indicate on the floor plan or drawing the location of lead hazard(s) to be abated as well as the work areas and containments. Label accordingly.
5. Describe the work practices to be implemented. **Describe specific work practices for each unique abatement activity.**
6. Explain the abatement methods that will be used.
7. Indicate what type of containment (I-1, I-2, I-3, etc.) will be used. Describe all elements. (Make sure that the level of containment chosen is appropriate for the work practices, and/or size of project outlined above.)
8. Explain the clearance procedures that will be used to clear this project.
9. List the final clearance inspector name, certification and certification number.
10. Indicate the clearance sampling methods that will be used, and the number of samples that will be taken.
11. Occupant protection plan prepared by:  
  
Name  
Certification and certification number  
Signature of preparer  
Date prepared