

440 Mamaroneck Avenue, Suite S 512 Harrison, NY 10528 T: 914.813.1900 F: 914.813.1919 www.stillmanmanagement.com



Dear Unit Owner:

Enclosed please find the Renovation agreement for **The Consulate on The Park**. Please read, sign and return this form to the attention of Dawn Levin at Stillman Management Realty Corp. along with the following required documents:

- 1. A detailed description/scope of work from the Contractor for Board review and approval.
- **2.** Any plumbing work and/or electrical work must be done by licensed plumbers and electricians, all necessary permits must be obtained before work may begin, (certificate of insurance must be included).
- **3.** Those residents replacing hard wood flooring, must submit the spec sheet for the underlayment being used, as well as comply with the carpet rules per the House Rules.
- **4.** Contractors and/or painters must be <u>**EPA certified**</u> if they will be performing work that disturbs any painted surfaces (more than 6 square feet). A copy of this new rule is attached.
- 5. General contractor's certificate of insurance and copy of license.
- 6. Deposit check in the amount of \$500 payable to The Consulate on The Park is required and will be deposited and cashed and return upon completion of work and submission of Certificate of Compliance from the building department.
- 7. Indemnification form (must be signed by the unit owner and all contractors).
- 8. Contractor, plumber and electrician must carry Contractual Liability. Attached is a list of insurance carriers that sometimes exclude this coverage. The contractor can request their carrier to add the following to their certificate: "No exclusion for contractual liability or injury to employees" in the "Description of Operations" section. Contractor's will not be approved to do work in your unit if they do not have this clause written in their COI.

Note: Any structural work to kitchens and bathrooms will require a permit from the Building Department.

Before approval may be granted, the alteration agreement must be submitted with the <u>all</u> <u>completed documents listed above</u>. The certificate of insurance must read as follows: The Consulate on The Park and Stillman Management Realty Corp. listed as additional insured. *Sample provided*.

Upon completion of all work, the unit owner is responsible for closing all permits and submitting to Stillman Management Realty Corp. a copy of the Certificate of Compliance from the building department.

Deposit checks will not be returned until all paperwork is completed and submitted.

Thank you for your attention to this matter.

Sincerely,

Stillman Management Realty Corp.

CAPITAL IMPROVEMENT CHECKLIST

* EACH ITEM MUST CHECKED OFF AND INCLUDED IN ORDER TO AVOID AN INCOMPLETE APPLICATION*

 Alteration Agreement Indemnification Form (contractor, plumber and electrician) EPA Certification COVID FORM Permit (if applicable) Renovation Deposit (written out to Building) 	Building	Apt #
General Contractor Electrician Plumber COPY OF LICENSE General Contractor Electrician Plumber DESCRIPTION OF WORK, PLANS General Contractor Electrician Plumber DESCRIPTION OF WORK, PLANS General Contractor Electrician Plumber OTHER Alteration Agreement Indemnification Form (contractor, plumber and electrician) EPA Certification COVID FORM Permit (if applicable) Renovation Deposit (written out to Building)	Phone	Alt Phone
 Electrician Plumber COPY OF LICENSE General Contractor Electrician Plumber DESCRIPTION OF WORK, PLANS General Contractor Electrician Plumber Other Alteration Agreement Indemnification Form (contractor, plumber and electrician) EPA Certification COVID FORM Permit (if applicable) Renovation Deposit (written out to Building) 	CERTIFICATE OF INSURANCE (LIABILITY &	WORKERS COMPENSATION)
 Plumber COPY OF LICENSE General Contractor Electrician Plumber DESCRIPTION OF WORK, PLANS General Contractor Electrician Plumber OTHER Alteration Agreement Indemnification Form (contractor, plumber and electrician) EPA Certification COVID FORM Permit (if applicable) Renovation Deposit (written out to Building) 	General Contractor	
COPY OF LICENSE General Contractor Electrician Plumber DESCRIPTION OF WORK, PLANS General Contractor Electrician Plumber OTHER Alteration Agreement Indemnification Form (contractor, plumber and electrician) EFA Certification COVID FORM Fermit (if applicable) Renovation Deposit (written out to Building)	Electrician	
General Contractor Electrician Plumber DESCRIPTION OF WORK, PLANS General Contractor Electrician Plumber OTHER Alteration Agreement Indemnification Form (contractor, plumber and electrician) EPA Certification COVID FORM Renovation Deposit (written out to Building)	Plumber	
 Electrician Plumber DESCRIPTION OF WORK, PLANS General Contractor Electrician Plumber OTHER Alteration Agreement Indemnification Form (contractor, plumber and electrician) EPA Certification COVID FORM Permit (if applicable) Renovation Deposit (written out to Building) 	COPY OF LICENSE	
Plumber DESCRIPTION OF WORK, PLANS General Contractor Electrician Plumber OTHER Alteration Agreement Indemnification Form (contractor, plumber and electrician) EPA Certification COVID FORM Renovation Deposit (written out to Building)	General Contractor	
DESCRIPTION OF WORK, PLANS General Contractor Electrician Plumber OTHER Alteration Agreement Indemnification Form (contractor, plumber and electrician) EPA Certification COVID FORM Permit (if applicable) Renovation Deposit (written out to Building)	Electrician	
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 Electrician Plumber OTHER Alteration Agreement Indemnification Form (contractor, plumber and electrician) EPA Certification COVID FORM Permit (if applicable) Renovation Deposit (written out to Building) 	DESCRIPTION OF WORK, PLANS	
 Plumber OTHER Alteration Agreement Indemnification Form (contractor, plumber and electrician) EPA Certification COVID FORM Permit (if applicable) Renovation Deposit (written out to Building) 	General Contractor	
OTHER	Electrician	
 Alteration Agreement Indemnification Form (contractor, plumber and electrician) EPA Certification COVID FORM Permit (if applicable) Renovation Deposit (written out to Building) 	Plumber	
 Indemnification Form (contractor, plumber and electrician) EPA Certification COVID FORM Permit (if applicable) Renovation Deposit (written out to Building) 	OTHER	
 EPA Certification COVID FORM Permit (if applicable) Renovation Deposit (written out to Building) 	Alteration Agreement	
COVID FORM Permit (if applicable) Renovation Deposit (written out to Building)	Indemnification Form (contractor, p	lumber and electrician)
Permit (if applicable) Renovation Deposit (written out to Building)	EPA Certification	
Renovation Deposit (written out to Building)	COVID FORM	
	Permit (if applicable)	
	Renovation Deposit (written out to B	uilding)
Application Fee (written out to Management Company)	Application Fee (written out to Mana	gement Company)

The Consulate on the Park Condominium 1-4 Consulate Drive Tuckahoe, New York 10707

APARTMENT RENOVATION APPLICATION FORM

Unit Owner:

The following rules are promulgated pursuant to Article 6.11 of the By-Laws. I hereby request your consent to make the repairs, alterations and renovations and/or to install the equipment described in the attached document (the "Work") in the above apartment. The attached document is hereby made a part of this Agreement.

1. I agree, before any of the Work is begun:

(a) To provide you, the Condominium, with a complete and conformed copy of every agreement made with contractors, subcontractors and suppliers, which agreements must be approved by you as to legal content including but not limited to insurance requirements and defense, indemnification and hold harmless language.

(b) If required by law or governmental regulations, to file plans with and to procure the approval or permits of all governmental agencies having jurisdiction over the Work and, not more than ten (10) days after receipt of such approval, to deliver to you a copy of every permit or certificate issued. If there be any doubt as to the need for such approval, you shall be the sole arbiter in resolving the doubt.

(c) To procure from my contractor(s), subcontractor(s) and supplier(s):

(i) Comprehensive personal injury liability and property damage insurance policies, each in the amount of \$1,000,000.00 or such other amount and terms as shall be satisfactory to the Board of Managers, which policies name the Condominium and the Managing Agent, as well as myself, as parties insured. Such policies shall provide that they may not be terminated until at least ten (10) days after written notice to you; and

(ii) Workers Compensation and Employees Liability insurance policies, covering all employees of the contractor, contractors or subcontractors.

All such insurance certificates evidencing their issuance shall be delivered to you.

2. If the Condominium is required or shall deem it appropriate to seek legal, engineering or architectural advise prior to granting permission, I agree to reimburse you, on demand, for all such fees incurred, and if permission be granted, then, in any event, prior to commencement of any of the Work. 3. It is understood that:

(a) I assume all risks of damage to the building and its mechanical systems, and to persons and property in the building which may result from or be attributable to the Work being performed hereunder and all responsibility for the maintenance and repair of any alterations and installations after completion. This responsibility covers all work, whether or not structural, weather tightness of windows, exterior walls or roofs, waterproofing of any part of the building directly or indirectly affected by the Work, and maintenance of all heating, plumbing, electrical, air conditioning and other equipment installed or altered pursuant hereto. If the operation of the building, or any of its equipment, is adversely affected by the Work, I shall, when so advised, promptly remove or cure the cause of the problem.

(b) I recognize that there will be no change in the operation of the building's plumbing or heating systems, to facilitate the functioning of any plumbing or heating equipment I may be installing.

(c) The alterations and materials used shall be of the quality and style in keeping with the general character of the building. The Board of Managers has the right to approve same, and to compel removal of same, should it not meet the Board's criteria.

(d) Except for your negligence, I shall defend, indemnify and hold the Condominium, its officers, managers, employees and agents harmless from and against all liability, damage, claims, demands, costs, judgments, fees, reasonable attorney fees or losses arising out of the performance or failure of performance of work or services resulting from any cause whatsoever by myself, the Contractor or any third persons under the direction or control of myself or the Contractor and to reimburse the Condominium or the Managing Agent for any expenses (including, without limitation, attorneys' fees and disbursements) incurred as a result of the such work.

4. All permitted work shall be completed within ______days after governmental approval thereto has been granted or, if no such approval is required by law or regulation, then from the date hereof. Any and all plumbers or electricians utilized will be licensed to practice their profession, and approved by the City, Village or Town Building Departments.

5. No work shall be done, except between the hours of 8:30 a.m. and 5:00 p.m., and on Saturdays between the hours of 10:00 a.m. and 5:00 p.m., Sundays and holidays excluded, and any work which can produce unusual noises, which might be disturbing to building occupants, shall not be done before 9:00 a.m.

6. All precautions will be taken to prevent dirt and dust from permeating other parts of the building during the progress of the alteration. Materials and rubbish will be placed in barrels or bags, before being taken out of the apartment. All such barrels or bags, rubbish, rubble discarded equipment, empty packing cartons and other materials will be taken out of the building and removed from the premises at my expense. I recognize that the removal may take place only at such times as the Superintendent of the building may direct. I shall be strictly responsible to make sure that, upon completion of work, the premises will be free from dirt, implements, surplus materials and the like, and that the common areas will be left in the status they were in prior to the start of said work.

7. I am including with this alteration request form a check in the amount of \$500.00; payable to The Consulate on the Park Condominium, as a refundable damage deposit which may be applied by you against the cost of repairing any damage to any of the common grounds, facade, stairwells, hallways, doorways and the like which may be caused by myself or any contractor, subcontractor or supplier employed by me in connection with an approved alteration or against any administrative charge levied against me for violation of any rules or conditions of approval thereof.

8. I will pay any costs incurred by the Condominium in connection with its review of this application including engineer fees, attorney's fees, consultant fees and the like.

9. I will bear the entire cost of alterations and installations and pay all bills incurred in connection therewith, not later than thirty (30) days after completion of the Work. If any mechanic's liens be filed for work claimed to have been done or materials alleged to have been supplied, I shall cause such liens to be discharged within ten (10) days after such filing. If I fail so to do, you may exercise any or all of your rights and remedies under the By-Laws or this Agreement, including paying the bills and adding the charge incurred to my account as additional common charges due to the Condominium.

10. At the completion of the Work, I will deliver to you an amended Certificate of Occupancy and a certificate of the Board of Fire Underwriters, if either be required, and such other proof as may be necessary to indicate that all work has been done in accordance with all applicable laws, ordinances and Government regulations. Failure to obtain same, when requested by the Board of Managers, will result in my having to remove the alterations and restore the property to its original condition.

11. I recognize that by granting consent to the Work, you do not profess to express any opinion as to the design, feasibility or efficiency of the Work.

12. My failure to comply with any of the provisions hereof shall be deemed a material breach of the provisions of the By-Laws and the House Rules, pursuant to which your consent has been granted, and, in addition to all other rights contained therein, including fines, administrative charges and indemnification of you by myself, you may require that all work not done in compliance with this Agreement be removed and the premises restored to its original condition and/or suspend all further work and prevent workmen from entering my apartment for any purpose other than to remove their tools or equipment.

13. Until further notice, I understand that the administrative charge for failure to obtain the express written authorization of the Board of Managers prior to commencing Work in my apartment, for failure to adhere to the specifications of the Work for which I have received authorization or for any other failure to observe my obligations hereunder, shall be two hundred fifty (\$250.00) dollars per day or per incident as the case may be. I

agree that the administrative charge is reasonable in scope and in purpose with the alteration rules to ensure compliance and to compensate the Condominium for its reasonable expenses upon my failure to so comply and does not constitute a penalty. The administrative charge shall be deemed additional common charges as provided by the By-Laws and shall be collectable as such.

14. This Agreement may not be changed orally. This Agreement shall be binding on you, me, and our personal representatives and authorized assigns.

Annexed hereto is the "Work" document and a rider of _____ pages which is made a part of this agreement.

Very truly yours

UNIT OWNER

UNIT OWNER

DATE

PERMISSION GRANTED FOR WORK AS HEREWITH SUBMITTED: The Consulate on the Park Condominium

By: _____, AGENT

DATE

THE CONSULATE ON THE PARK CONDOMINIUM 1-4 Consulate Drive Tuckahoe, New York 10707

Unit Alteration Request Form,

Date:

To: Board of Managers

From: [Name] ______

[Address] _____ [Unit No.] _____

Approval is hereby requested for the following addition/alteration/repair at the above address:

Description: (Please outline the change, including major components and construction material to be used. In addition, please provide a sketch indicating dimensions.)

Remarks:

Approval: _____

Board of Managers

Date

CLIENT / MANAGING AGENT / CONTRACTOR INDEMNIFICATION AND INSURANCE REQUIREMENT AGREEMENT

Contractor Name:	
Managing Agent Name:	Stillman Management Realty Corp.
Property Name & Address	The Consulate on The Park. Consulate Drive Tuckahoe, NY 10707
Unit Owner / Unit #	

Whereas the "Contractor" seeks to perform certain work pursuant to oral and/or written agreement for listed shareholder/unit-owner within an apartment/unit located at listed "Property", managed by the "Managing Agent"; parties agree to the following:

ACCESS TO PROPERTY LOCATION AND COMMON AREAS

Whereas, Contractor, in order to perform work for shareholder/unit-owner, requires access to various parts of the Property Location, which are the responsibility of the Property Location and Managing Agent, and not the responsibility of shareholder/unit-owner (the "Common Areas"); and, Whereas, Contractor acknowledges the Property Location's and/or Managing Agent's exposure to liability arising out of the Contractor's access to the Common Areas and work at the Property Location; and, Whereas, Contractor agrees that Contractor and/or Contractor's insurance carriers (and NOT Property Location, Managing Agent or their insurance carriers) should be responsible for said liability; Property Location, and Managing Agent agree as follows:

INDEMNIFICATION AGREEMENT

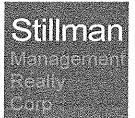
In consideration for access to the Property Location, to the fullest extent allowable by law, Contractor agrees to indemnify, defend and hold harmless the Unit Owner, the Property Location and/or Managing Agent from any liability, loss, or other claim, including but not limited to expenses and reasonable attorneys' fees, related to death, personal injuries or property damage (including, but no limited to loss of use thereof) arising out of or in connection with the performance of the work by the Contractor, its agents, servants, subcontractors or employees, except to the extent of any fault attributed to the Property Location and/or Managing Agent.

INSURANCE REQUIREMENT AGREEMENT

While performing work at the Property Location, Contractor shall maintain: workers compensation and employer's liability insurance with statutory limits; and commercial general liability insurance with a minimum limit of \$1,000,000 per occurrence, which shall name Property Location, Managing Agent and Unit Owner as "Additional Insured" and which shall be primary and non-contributory to any other insurance available to the Property Location and/or Managing Agent. If required by Property Location or Managing Agent, Contractor shall also maintain excess/umbrella liability insurance.

Commencement of the work by the Contractor at the Property Location shall be deemed acceptance of this Indemnification and Insurance Requirement Agreement for purposes legally equivalent to full execution of same. These terms supersede any others which may be inconsistent herewith. The term of this Agreement shall be one year, commencing on the contractor Authorized Signature Date (below); and this Agreement shall renew annually for subsequent one year terms until cancelled in writing by either party.

	Signature	Printed Name	Date
Agent for Property:			
Contractor:			
Unit Owner			





To Whom it May Concern:

As business in the State of New York, and in compliance with Executive Order

202.6 asset forth by Governor Andrew Cuomo,___

executing work at the___

Contractor Name

Building Address

Our number one priority is the health and safety of our employees, clients, and families.

We are doing our part to reduce the risk of infection by following the guidelines and best practices from the CDC and from our local and national government agencies. Wehave implemented a stringent cleaning routine at our shop, including disinfecting work areas multiple times a day. Employees are asked to wash their hands and use sanitizerroutinely, comply with social distancing, and wear protective gloves and face masks when necessary. Anyone feeling ill has been asked to stay home and monitor their situation.

Thank you for complying with the required New York State Safety

Plan.By signing below, we indicate we have a NYS Safety Plan in

place.

Contractor Name

Contractor Signature

Date

Building and Unit Number

ACORD CERTIFICATE OF LIABILITY INSURANCE

PRODUCER FAX * NAME AND ADDRESS OF INSURANCE CARRIER	THIS CERTIFICATE ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.			
CARRIER	INSURERS AFFORDING COVERAGE			
INSURED	INSURER A: xxxxxxxxx			
	INSURER B: xxxxxxxxx			
* NAME AND ADDRESS OF INSURED	INSURER C:			
(Must match signed contract)	INSURER D:			
	INSURER E:			

COVERAGES

THE POLICES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INS LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFEC				
	GENERAL LIABILITY		,	, , , , , , , , , , , , , , , , , , ,	EACH OCCURREN	ICE	\$ 1,000,000
А	COMMERCIAL GENERAL LIABILITY	*****	00/00/0	00/00/00	DAMAGE TO RENT	DAMAGE TO RENTED PREMISES	
	CLAIMS MADE 🛛 OCCUR				MED EXP (any 1 pe	erson)	\$ 10,000
	□				PERSONAL & ADV	INJURY	\$ 1,000,000
	□				GENERAL AGGRE	GATE	\$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:				PRODUCTS - COM	IP/OP AGG	\$ 2,000,000
	POLICY - PROJECT - LOC						
	AUTOMOBILE LIABILITY				COMBINED SINGL	E LIMIT	s
В	ANY AUTO	****	00/00/00	00/00/00	(Ea Accident)		э
	ALL OWNED AUTOS				BODILY INJURY		\$
	SCHEDULED AUTOS				(per person)		Ŷ
	HIRED AUTOS		NP	LE	BODILY INJURY		s
	NON OWNED AUTOS				(per accident)		Ť
	<u> </u>				PROPERTY DAMA	GE	\$
					(Per accident)		
	GARAGE LIABILITY				AUTO ONLY – EA	1	\$
					OTHER THAN AUTO ONLY	EA ACC	\$
					EACH OCCURREN	AGG	\$ \$
Б						ICE	
В					AGGREGATE		\$
							\$
							\$
	RETENTION \$	****	00/00/00	00/00/00			\$
*	WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY	****	00700700	00/00/00	E.L. EACH ACCIDE		\$
	ANY PROPRIETOR/PARTNER/EXECUTIVE				E.L. DISEASE -EA		\$ \$
	OFFICER/MEMBER EXCLUDED?						
	OTHER				E.L. DISEASE –PO		\$
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS							
Also additionally insured: Unit Owner's Name, Address and Apt. Number							
The Consulate on The Park - Consulate Drive, Tuckahoe, NY 10707							
Stillman Management Realty Corp., 440 Mamaroneck Ave, Harrison, NY 10528							
Date of Move /Delivery/ Work:							
CERTIFICATE HOLDER CANCELLATION							
The Consulate on The Park C/O SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE				BEFORE THE			
Stillman Management Realty Corp.				EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KINDUPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.			
440 Mamaroneck Ave. S-512			FAIL				
Harrison, NY 10528				AUTHORIZED REPRESENTATIVE			
			Mu	st have signature			

XX*IF WORKERS COMP IS NOT ON THIS CERTIFICATE – YOU MUST PROVIDE (2) CERTIFICATES FROM STATE INSURANCE FUND (ONE FOR EACH ADDITIONAL INSURED)

Contractual Liability*

To avoid paying claims for large Labor Law 240 third-party Law suits, some insurance companies have removed contractual liability from their policies. In this case, your "Additional Insured" status with the contractor will be meaningless, and the contractor's insurance will not back the contractor's indemnification.

Here are few methods to try to determine if your subcontractor has contractual liability:

- 1. Ask for a copy of the contractor's/sub-contractor's insurance policy and have your broker review it.
- 2. Make sure "Contractual Liability" is added to the subcontractors' certificate and request "No exclusion for contractual liability or injury to employees" in the "Description of Operations" section.
- 3. Request Certificate Addendum **Acord** 855 NY for coverage details from contractor / sub-contractor

*Below is a list of insurance carriers that sometimes exclude this coverage and will not be accepted as an insurance carrier of your contractor, having your application held up and/or denied:

Acceptance Indemnity Ins. Co. Alterra E&S American <u>Safety</u> Arch Specialty Ins. Co. Atlantic Casualty Berkley Specialty Burlington Century Surety Colonial Co. Colony Endurance Essex Evanston Everest First Century First Mercury- Cover X Guard Insurance Companies Hermitage Hudson Kingstone Insurance

Max Specialty Maxum Indemnity Co. Mt. Valley Indemnity National Fire & Marine National Contractors Ins Co. Northfield North Sea Nova Casualty Penn Star Preferred Contractors Inc. Ranger RCA RU / Mt. Hawley Rockingham Insurance Company Rutgers/American European Ins. Co. Tower Insurance Tudor U.S. Liability/ U.S. Underwriters/ USU Utica First Valley Forge Western Heritage

We also recommend you require your subcontractors include a description of the work they plan to do. For example: roofing, excavation, residential carpentry, etc.

\$32,500/Day Violation Fine for Lack of Compliance EPA's NEW Lead-Based Paint Rule Nationally Enforceable April 22, 2010

Beginning April 22, 2010, <u>ANYONE</u> who is paid to perform work that disturbs paint greater than six square feet in housing and child-occupied facilities built before 1978 must comply with the EPA's Lead Renovation, Repair and Painting (RRP) Program. Individuals who must comply include: residential rental property owners/managers, general contractors, and special trade contractors including painters, plumbers, carpenters, electricians and sheet rockers. Under this new rule, enforcement actions against **violators can include penalties up to \$32,500 per violation per day**, as well as the potential for costly litigation. This new EPA rule will be potentially litigious and tightly regulated.

Under this rule, each legal entity that performs paint disturbances must have applied to the EPA and been certified prior to April 22, 2010. All Certified firms performing such paint disturbances must ensure:

- 1. All individuals performing activities that disturb painted surfaces are either certified renovators or have been trained by a certified renovator.
- 2. A certified renovator is assigned to each renovation and performs all the certified renovator responsibilities.
- 3. All renovations are performed in accordance with the work practice standards of the Lead-Based Paint RRP Program.
- 4. The Certified Renovator provides pre-renovation documentation notifying occupants of work to be performed.
- 5. The program's recordkeeping requirements are met and kept for three years.

All certified firms must also employ a Certified Renovator(s) who has completed an EPA-approved Certified Renovator course (www.RRPTrainer.com). The Certified Renovators are responsible for ensuring overall compliance with the Lead-Based Paint RRP Program requirements at assigned renovation sites. A certified renovator must:

- 1. Use a test kit acceptable to EPA.
- 2. Provide on-the-job training to workers.
- 3. Be physically present at the work site when warning signs are posted, while the work-area containment is being established, and while the work-area cleaning is performed.
- 4. Regularly direct work being performed by other individuals.
- 5. Be available, either on-site or by telephone, at all times.
- 6. Perform project cleaning verification.
- 7. Have copies of initial course completion certificate present at all times.
- 8. Prepare required records and maintain for three years.

In order to avoid potential issues with enforcement agencies, litigators or tenants, you must either become EPA compliant by taking the RRP Training course or certify your pre-1978 properties as Lead-Based Paint Free. The EPA has 90 days from the date of receipt of your application before they must reply. The April 22 deadline has already passed, so if you are not already compliant, make sure you become compliant in order to legally perform such work.

About the Author: This article was written by Lee E. Wasserman, President of LEW Corporation. Mr. Wasserman is a well respected national lead- based paint subject matter expert, has been a guest presenter for numerous associations as well as HUD, EPA, ABO, NYARM, FNYHC, NYAHMA... on the RRP rule and has been nationally active with lead based paint evaluations, remediation and training for more than 18 years. Visit LEW Corporation on the web at www.lewcorp.com.