



Lead Safe Cleveland Coalition
c/o Enterprise Community Partners, Inc.
Cleveland, OH
leadsafecle.org

COVER PAGE

Name: _____

Street Address: _____

Street Address 2: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____

Website (if available): _____

Contact Person's Name and Title: _____

Street Address: _____

Street Address 2: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____

Email Address: _____

Contracted Roles Addressed in this Response (check all that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Lead Risk Assessor | <input type="checkbox"/> General Contractor with | <input type="checkbox"/> RRP Certified Individual |
| <input type="checkbox"/> Lead Inspector | Renovation, Repair and | <input type="checkbox"/> Related Lead Safe Workers |
| <input type="checkbox"/> Lead Abatement Contractor | Painting (RRP) Firm | (specify): _____ |
| <input type="checkbox"/> Lead Clearance Technician | Certification | _____ |

Businesses Only

Business Tax ID #: _____

Business Structure (check one):

- | | | |
|---|---|--|
| <input type="checkbox"/> Sole Proprietorships | <input type="checkbox"/> Corporations | <input type="checkbox"/> Limited Liability |
| <input type="checkbox"/> Partnerships | <input type="checkbox"/> S Corporations | Company (LLC) |

Business is qualified to do business in the State of Ohio as a foreign corporation.

- | | | |
|------------------------------|-----------------------------|---|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Applicable |
|------------------------------|-----------------------------|---|