**REMEDIATION RECOMMENDED**

Date:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dear \_\_\_\_\_\_\_\_\_\_\_\_\_\_*(Owner/Operator)*:

According to our records, you have not remediated the lead poisoning hazards identified at your child care facility \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*(facility name)* located at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(facility address)* in accordance with the approved remediation plan. Recent laboratory reports received from the State Laboratory of Public Health indicate that the lead in water results are in excess of the acceptable levels set forth in N.C.G. S. § 130A-131.9C. Lead hazards in water are not considered remediated until laboratory results indicate levels below the water clearance standard of 15 ppb.

This Department recommends that you remediate the lead hazards in water on your property within **10 days** of receipt of this Notice. Once completed, you should contact this Department for an appointment for additional clearance testing. Questions about this noticeshould be directed to me at the address and telephone number above.

Sincerely,

Authorized Agent

CC: REHS, Regional Environmental Health Specialist

DCDEE Consultant

*(rev 12/2020)*