



**Genesee County Health Department  
G-O Lead Hazard Control and Healthy Homes Program  
3837 West Main St. Rd  
Batavia, NY 14020**



**Genesee-Orleans Lead Hazard Control and Healthy Homes Program  
Landlord Application**

Application Date: \_\_\_\_\_

**1. Owner Information**

Last Name: \_\_\_\_\_ First Name & Middle Initial: \_\_\_\_\_

Name of Corporation, LLC, Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ \*Ethnicity of owner \_\_\_\_\_

\*Race Codes: W=White, not Hispanic; B=Black, not Hispanic; H=Hispanic; N=Native American or Alaskan Native; A=Asian or Pacific Islander

**2. Property Information**

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Number of Dwelling Units in Building: \_\_\_\_\_ Number of Units to have Lead Hazards controlled: \_\_\_\_\_

Has any child living at this property been identified as lead poisoned? \_\_\_ Yes \_\_\_ No \_\_\_ Don't Know

**3. Dwelling Unit Information - Please complete the table below for each unit to be enrolled:**

Unit ID	# of Bedrooms	Tenant's Name	Lease Available Y/N	Phone#	Family Size
1					
2					
3					
4					

I hereby certify that I own the above named property and that the information provided in this application is true and complete to the best of my knowledge. In connection with this application for financial assistance to control the lead hazards at my property, I hereby authorize Genesee County to verify the accuracy of the information provided above. I agree to provide Genesee County and its consultants with reasonable access to the property for testing related to the program.

I hereby certify that if a property is being evaluated as vacant, the unit will stay vacant until work is completed and/or a tenant is qualified before gaining access to the unit.

I certify that I have received the EPA pamphlet titled, **Renovate Right** and that I must furnish a copy to my tenant(s). I understand that I must inform my tenant(s) regarding any known information about lead-based paint hazards at the property. Owner Signature: \_\_\_\_\_



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Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_