

Resident Questionnaire MOLD CALLS

Dispatcher will fill out personal information and first three questions. Property Manager/Community Manager will complete the remainder with the resident.

| | |
|---|--|
| Occupant Name: | |
| Title: | |
| Today's Date: | |
| Address | |
| Best Way to Reach Resident (Updated Phone #) | |

1. Ask the resident to describe in detail why they have called. Listen carefully and take notes.

2. Do you have a water leak? If yes, location of the leak and is the leak containable?

3. If they mention they visibly see mold/mildew, ask How large of an area ? (express area in square footage or ask to compare the size to something such as "big as a bread box"?)

Mold Building Observation Checklist

Begin the work order by registering the work order in the Mold Log

1. Inspect the areas that the resident pointed out during the questionnaire.
2. Inspect the following HVAC components:
 - Filter condition
 - Coils condition
 - Drip Pan/Condensate line
 - Fans
 - Duct board in the duct work
 - Return location
3. Check seals around doors and windows.
4. Check operation of exhaust fans.
5. Are the supply registers dirty?
6. Is the housekeeping neat and orderly or dirty?
7. What is the thermostat set on?
8. Inspect the entire home to include closets.
9. Are there any windows open? How often are they left open?

JOB REQUEST FOR MAINTENANCE WORK INVOLVING MOLD

INSTRUCTIONS:

For any maintenance activity which may involve disturbance of mold at quantities of 10 to 30 square feet, submit this completed form to the O&M Coordinator for approval. Authorization must be received prior to initiation of any work that may potentially involve disturbance of building materials containing fungi.

REQUIRED INFORMATION

| | |
|--|--|
| Date: | |
| Building Name and Number: | |
| Building Address: | |
| Description of area where work is to be performed: | |
| Requested Start Date: | |
| Anticipated Completion Date: | |
| Description of Activity: | |
| Quantity of mold (square feet) to be abated: | |
| Comments/Work Plan | |
| Signature (Building Maintenance Supervisor): | |

APPROVAL FOR MAINTENANCE WORK INVOLVING MOLD

INSTRUCTIONS:

The O&M Coordinator shall evaluate each maintenance work request to determine how the work shall proceed.

AUTHORIZATION

Granted _____

Denied _____

Authorization provided to:

Proceed with the following maintenance work:

WORK PRACTICES

The following work practices shall be used to avoid or minimize disturbance of building materials potentially containing funji:

Signature (O&M Coordinator):

Date:

Job Request Number:

Instructions to O&M Coordinator:

Return a copy of this completed form to the Building Maintenance Supervisor as authorization or denial for work to proceed.