**Property Information**

*To help find property information, visit the Lucas County Auditor’s AREIS online database at* [*icare.co.lucas.oh.us/lucascare*](http://icare.co.lucas.oh.us/lucascare/)*.*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Owner Name  *(as registered with the Lucas County Auditor and title recorded in Lucas County Records)* | | | | | Year Property Built  *(for certificate, property must be built before 1978)* | | | |
| Parcel # | Property Address | | | | | | Unit # | |
| City  Toledo | State  Ohio | Zip Code | Census Tract # | Is this property a… | Rental *(continue below)*  Family Childcare Home *(skip to Contact Info)* | | | |
| Have you registered this **rental property** with the Lucas County Auditor? | | | Yes   No | How many **rental units** are at this property address? | | One (1)  Two (2) | | Three (3)  Four (4) |

**Contact Information**

|  |  |
| --- | --- |
| Owner’s Name | Owner’s Phone Number  (     )       - |
| Owner’s Mailing Address | Owner’s Email Address |
| Designated Agent’s Name *(required for* ***all Owner’s outside of Lucas County****, must be a natural person, not a business entity, at least 18 years of age and of sound mind)* | Agent’s Phone Number  (     )       - |
| Agent’s Mailing Address | Agent’s Email Address |
| If ownership is held under partnership, corporation, trust, estate, or other non-natural person entity, please provide the names, mailing addresses, phone numbers, and email addresses of all current partners, statutory agents, corporate officers, trustees, or executors that may exist under such ownership. The address for non-natural person entities is the principal place of business, and the address of persons is the home address. | |

*Provide owner’s and designated agent’s (if any) information required under Chapter 1760 of Toledo Municipal Code.* *It is the Owner's obligation to notify the Health Department, in writing, of any change in the name, address, telephone number, and/or email address of any Agent designated within sixty (60) days after the change occurs.* ***We will mail your Lead-Safe Certificate to the Owner’s and/or Agent’s mailing addresses.***

**Local Lead Inspection Information**

*Property must pass local lead inspection to receive a Lead-Safe Certificate. If you are applying for a current Lead-Safe Certificate to be* ***reissued*** *with the same expiration date in your new ownership name, you do not need to provide a Lead-Safe Report or Proof of Certified Abatement.*

|  |  |  |
| --- | --- | --- |
| What kind of Lead-Safe Certificate are you applying for? | 5-year Lead-Safe Certificate  20-year Lead-Safe Certificate  **Reissue** of unexpired Certificate | Date of Local Lead Inspection or Certified Abatement      /     / |
| Name of Local Lead Inspector who performed Lead-Safe Report testing or Risk Assessor who Certified Abatement | | |

**Final Checklist**

|  |
| --- |
| Passing Lead-Safe Report **OR**  Proof of Certified Abatement at Property **OR**  N/A *(5-year Lead-Safe Certificate) (20-year Lead-Safe Certificate) (Reissue of unexpired Certificate)*  Registration Fee, checks made payable to “Toledo Lucas County Health Department Lead Ordinance Fund” *($25 / unit for 5-year and 20-year Lead Safe Certificates; $10 / unit for a reissue)* |

*Check that this form is accompanied by the following required documents:*

**Property Owner Signature**

|  |  |
| --- | --- |
| Signature | Date       /     / |

**Mail completed applications with supporting documents and payment to:**Toledo Lucas County Health Department  
ATTN: Lead-Safe Certificate  
635 N. Erie St.  
Toledo, OH 43604

**Submit with online payment:** [www.ToledoLeadSafe.com](http://www.ToledoLeadSafe.com)

**Call for assistance:** 419.213.4100

**For Internal Use by Toledo-Lucas County Health Department**

|  |
| --- |
| Property Owner Contacted  Data Entered  Lead-Safe Certificate Mailed (Date:      /     /     )  Additional Notes: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |