

MODOT Project

Job #:_

You must submit a completed Lead Abatement Project Contractor Re-Notification form twenty-four (24) hours changes from the original project notification (19 CSR 30-70.640(3).	
	prior to implementing any
 Submit form to the Lead Licensing Program by fax: (573) 526-0441 or email: Lead@health.mo.gov Please type or print legibly. Call 888-837-0927 with any questions Send a copy to MODOT Resident Engineer 	
PART A. PROJECT INFORMATION	
PROJECT PHYSICAL LOCATION (NAME OF ROAD, MILE MARKER, CROSS STREET, NAME OF WATER WAY ETC)	
LEAD ABATEMENT PROJECT CONTRACTOR (NAME AND ADDRESS)	2
PART B. PROJECT CHANGES (Please list all changes to the original project notification in new start date; new completion date; new working hours, different supervisor or worker, etc	
Type of changes being made (check all that apply and specify details below)	
Changing start or end dates	(date/ further notice)
Starting/leaving early or late Project complete (date completed)	
Not working today only (<i>date</i>)	
Specific details of changes (i.e.: Changing end date from 2/28/10 to 3/5/10; Will be leaving job at 2:30	pm today (3/5/10)):
NOTE: THE FOLLOWING STATEMENT MUST BE SIGNED BY THE LEAD ABATEMENT SUPERVISOR	
I hereby certify that all of the information provided in this re-notification is complete and true knowledge.	e to the best of my
SIGNATURE OF LEAD ABATEMENT SUPERVISOR	DATE
	DATE