

SECTION 1018 THE REAL ESTATE NOTIFICATION AND DISCLOSURE RULE
TIP/COMPLAINT FORM

(Please print using ink)

Date: 8/23/06

Time: 2:20

Official Taking Call (name/title): Carmen & Franceschi Case Manager
Official's Phone Number: (860) 547-1426 x7167
State (circle one): Connecticut

Status of Person Initiating Tip/Complaint:

- Purchaser (Buyer)
- Tenant (Lessee)
- Other (Describe: Hospital staff)

Did sale or rental involve a Seller's Agent or Lessor's Agent? (Y/N) (N)

(If Agent involved, also include Agent's name, address & phone # under Agent/Broker below.)

Complainant's Name & Address

Sesenia Acosta

Phone#: (860) 525-1834 x26

Address of Sale or Rental Property

43-45 Colonial Street
Hartford, CT

Phone#: ()

Alleged Violator's Name & Address

Douglas Paulino
45 Colonial ST 10th floor
Hartford, CT

Phone#: (860) 819-8050

Name & Address of Agent/Broker

Phone#: ()

Age of Property or Year Built (if known): 1910

Ages of Children Residing in the Apartment/House: 5 yrs, 2 yrs, 10 yrs

Are there known elevated blood levels at this address? (Y/N/Unknown)

Alleged Violation: This landlord has 4 buildings which he owns, 3 of the buildings there has been children w/ elevated lead levels between 10-19, including 2 of his own children. He recently rented an apt to a new tenant w/ children between the ages of 2-5 and never disclose any information on lead. Apartment was rented and lease sign but landlord didn't give any information upon talking to the staff from

(over ->)

Sales Transaction

Date Purchase and Sale Agreement Obligated Purchase of Property? 6/1/06

Rental Transaction

Is the lease agreement written or unwritten? (circle one)

Date of Initial Lease: _____

How long has the Complainant resided at the unit? _____

How many units are in the Complainant's building? 3

Number of pre-1978 residential units owned/managed by the Lessor/Agent: 4

General Questions

Type of Housing (circle one, if applicable): Private Military HUD-Assisted Federal

Did complainant receive any information about lead-based paint/lead-based paint hazards? (Y/N/Unknown)

Did complainant receive an EPA-approved lead hazard information pamphlet? (Y/N/Unknown)

Agency Information

(Please complete & attach any applicable supporting documents)

1. Has your organization conducted any inspections at the property confirming the presence of lead-based paint and/or lead-based paint hazards? (Y/N)
2. Has your organization issued an order(s) to reduce lead hazards at this property? (Y/N) If so, when was it issued? _____
3. Has your organization received any tips and complaints in the past regarding this Seller/Lessor/Agent? (Y/N)
4. Have there been any other reported elevated blood levels at this property or other properties owned/managed by the Seller/Lessor/Agent? (Y/N)

Fax or Mail to:

Molly Magoon, U.S. EPA NEW ENGLAND; One Congress St., (SEP), Boston, MA 02114
Fax # (617) 918-1809 Voice# (617) 918-1848

Copy:

Connecticut Department of Public Health; 410 Capitol Avenue, MS #51LED; P.O. Box 340308
Hartford, CT 06134-0308; Fax # (860) 509-7295 Voice # (860) 509-7299

For EPA Use Only

Date received: _____ Action: _____ EPA rep. _____

The Lampp Program, They informed me that this a continue practice of this Landlord w/ other tenants,

Landlord was informed through a training on Lead safe practice, and through outreach worker from Healthy homes that he must disclose this information if he's renting to family w/ children. Six or younger.