



# Neighborhoods & Housing Services Department

## Site Specific Environmental Checklist

Project Address (House #, St Dir, St Name, St Type): \_\_\_\_\_

### Include ALL of the following items with this form:

1. Brief Work Scope: note each activity to be undertaken as part of the project, regardless of funding source.
2. Detailed map(s) printed from KCMO on-line mapping system > <http://maps.kcmo.org/apps/parcelviewer/>
3. Photosheet (2 photos per page - in MS Word) with CLEAR photos of all four elevations, as well as each specific area to be worked on (e.g. furnace, ductwork, kitchen/bathroom flooring, representative windows/doors, ceilings, sidewalk, roof, soffits, etc.)
4. A completed "KCMO Lead Safe Screening Worksheet"
5. Either a clear copy of the FEMA Flood Insurance Rate Map (FIRM) identifying the **exact** location of the house ([Hold Down "Ctrl" Button & Click Here to Access the FEMA FIRMette Website](#)), OR a "Standard Flood Hazard Determination" FEMA Form 086-0-32 (formerly Form 81-93) indicating the Flood Zone in which the house sits (Zones B, C or *Shaded X* are acceptable)

### Site Conditions

Do any of the following conditions exist on the property?

- Y  N Distressed vegetation or soil staining – Describe: \_\_\_\_\_
- Y  N Chemical or petroleum odors (particularly inside basement) Describe: \_\_\_\_\_
- Y  N Spilled oil/chemicals, pools of unusual liquids– Describe: \_\_\_\_\_
- Y  N Drums or barrels? Describe: \_\_\_\_\_
- Y  N Abandoned machinery, cars, refrigerators, etc. – Describe: \_\_\_\_\_
- Y  N Transformers – pole or pad mounted?- Describe: \_\_\_\_\_

- Signs of leaking?  Y  N "Non PCB" label?  Y  N

### Other Considerations

Does the Project anticipate removal of any of the following?

- Y  N Fluorescent light fixtures
- Y  N Thermostats containing a mercury-filled tipping mechanism
- Y  N Cementitious/cement-board shingle siding Total Square Footage? \_\_\_\_\_
- Y  N Pipe wrap on furnace or ductwork Total Linear Footage? \_\_\_\_\_
- Y  N Linoleum, vinyl, or tile flooring Total Square Footage? \_\_\_\_\_
- Y  N Ceiling tiles or ceiling texturing ("popcorn" texturing) Total Square Footage? \_\_\_\_\_

Comments (use back of Checklist as necessary):

Preparer (Print): \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Required) (Required) (Required)

Additional Comments: