

Lead Hazard Control Program

Provider Referral Form



The Lead Hazard Control Program helps qualified families in the City of Chester in Delaware County, PA reduce or eliminate lead-based paint hazards in their homes.

Date of Referral:

Referred By (Agency):

Referred By (Name):

Phone #:

Email:

Client Eligibility (must be “Yes” to one of the following)

Is there a child who lives in the home under the age of 6?	Yes	No
Is there a child under the age of 6 who visits the home more than 6 hours a week?	Yes	No
Does a pregnant woman live in the home?	Yes	No

Client Information:

Parent/Caregiver Name:

Home Address:

Phone #:

Best Availability (days/times):

Parent/Caregiver Primary Language (if other than English):

Child’s Name:

Child’s Age:

Additional Information (if known):

Does child have an elevated blood lead level?	Yes	No
Was the property built before 1978?	Yes	No

By checking this box, I confirm that this referral was discussed with the client. The client consents to being referred to NNCC for Lead Hazard Control Program services.

Please return completed form to Ms. Deepa Mankikar by fax (215-731-2400) or email (healthyhomes@ncc.us) or you may call 215-731-2474 to complete this referral over the phone.

Thank You!