



Program Partners



## New Castle County No-Lead Programs Referral Form

IDENTIFY-CONTROL LEAD-BASED PAINT & HOME HEALTH HAZARDS FOR ALL NEW CASTLE COUNTY ZIP CODES

Healthy Homes addresses a variety of high-priority home health hazards, such as carbon monoxide/radon, leaking roofs, excess heat and/or cold, electrical hazards, level surfaces, structural collapse, injury and safety hazards, lighting, domestic hygiene, in addition to lead-based paint. Lead is a highly toxic metal that may cause a range of health problems, especially in young children under the age of 6, including damage to the brain, kidneys, nerves, and blood. Children may obtain lead poisoning by ingesting lead dust, eating paint chips, &/or handling contaminated objects.

FOR MORE INFORMATION VISIT OUR WEBSITE <https://www.nccde.org/NoLead>

|              |           |       |
|--------------|-----------|-------|
| Agency Name: | Preparer: | Date: |
|--------------|-----------|-------|

### CLIENT INFORMATION

|                         |  |
|-------------------------|--|
| Client Name             |  |
| Physical Address/Unit # |  |
| City/State/Zip          |  |
| Are you Renting or Own? |  |
| Email Address           |  |
| Cell Phone Number       |  |

### QUALIFYING CHILD INFORMATION (Please list all children UNDER 18 and those UNDER the age of 6 residing or spending 6+ hours per week in your home)

| Date of Birth<br>(MM/DD/YYYY)         | Age | Name | Tested for Lead?<br>(Yes or No) |
|---------------------------------------|-----|------|---------------------------------|
|                                       |     |      |                                 |
|                                       |     |      |                                 |
|                                       |     |      |                                 |
|                                       |     |      |                                 |
| List any pregnant household member(s) |     |      |                                 |

### CIRCLE Household Income FEDERAL QUALIFYING INCOME GUIDELINES

| NUMBER IN FAMILY/HOUSEHOLD    | 1      | 2      | 3      | 4      | 5      | 6       | 7       | 8       |
|-------------------------------|--------|--------|--------|--------|--------|---------|---------|---------|
| 30 % LMI - Income Limits (\$) | 23,450 | 26,800 | 30,150 | 33,500 | 36,200 | 40,2800 | 45,420  | 50,560  |
| 50 % LMI - Income Limits (\$) | 39,100 | 44,650 | 50,250 | 55,800 | 60,300 | 64,750  | 69,200  | 73,700  |
| 80% LMI - Income Limits (\$)  | 62,500 | 71,400 | 80,350 | 89,250 | 96,400 | 103,550 | 110,700 | 117,850 |

Send the completed form via fax to (302) 395-5592 or email [nolead@newcastlede.gov](mailto:nolead@newcastlede.gov)