Commonwealth of Virginia
Department of Professional and Occupational Regulation
9960 Mayland Drive, Suite 400
Richmond, Virginia 23233-1485
(804) 367-8595
www.dpor.virginia.gov



Board for Asbestos, Lead and Home Inspectors ASBESTOS WORKER LICENSE APPLICATION Fee \$80.00

A check or money order payable to the <u>TREASURER OF VIRGINIA</u>, or a completed <u>credit card insert</u> must be mailed with your application package.

APPLICATION FEES ARE NOT REFUNDABLE.

	Provide a <i>current</i> Virginia Board for	•	•	•		ofessional and Occup	pational Re	gulation or the		
	Virginia Licens	Г				Expiration D	ate			
1.	Full Legal Name	: (As it appea	ars on your gove	ernment issued ID	or other legal o	documentation.)				
	Last (required)		First	(required)		Middle		Generation		
2.	Provide at least	Provide at least one of the following identification numbers*:								
	Social Sec	Social Security Number and/or								
	Virginia DI	MV Control Nu	ımber							
	➤ Enter the same	e identification nur	mber as used on exa	amination, previous ap	pplications or licens	es on file with the departmer	nt.			
						to engage in a business, trac <u>Virginia</u> Department of Moto		or occupation issued		
3.	Date of Birth	·	(M	ust be at least 18	years of age.)					
		MM/DD/Y	YYY							
4.	Maiden or Forme	er Name(s)								
5.	Mailing Address (PO Box accepted) The mailing address will be printed on the license.			City			State	Zip Code		
6.	Street Address ((PO Box <u>not</u> ADDRESS REC	. ,	Check here if	Street Address is t	he <u>same</u> as the Mailing Addr	ress listed above	e. 		
				City			State	Zip Code		
7.	Contact Number	re		Oity			Oldio	2.p 0000		
١.			Primary Telephor	none Alternate Telephone		Fax				
8.	Email Address									
	Email address is considered a public record and will be disclosed upon request from a third party.									
	DATE I		TRANS CODE	ENTITY#		FILE #/LICENSE #		IOOUE DATE		
OFFIC		FEE		ENIIIY#	0004	FILE #/LICENSE #		ISSUE DATE		
ONLY			1020		3301					

9.	Asbestos Worker - Which of the following requirements are you using to qualify for this license type?								
	Successful completion of EPA or Board-approved initial accredited <u>asbestos worker</u> training program <u>and</u> al subsequent EPA or Board-approved refresher accredited <u>asbestos worker</u> training programs								
	all subsequent EPA or Board-approved refi Required Attachments: Attach a copy of	oproved initial accredited <u>asbestos supervisor</u> resher accredited <u>asbestos supervisor</u> trainir f the training course certificate showing succe thin the last 12 months preceding the date the	ng programs essful completion of the						
10.	Do you hold a <u>current</u> or <u>expired</u> environmental jurisdiction (excluding Virginia)? No Yes If yes, complete the following table Standing from each jurisdiction.	remediation license, certification or regis	, ,						
	State/Jurisdiction	License, Certification or Registration Number	Expiration Date						
11.	 ◆ Certifications of Licensure/Letter of Good Standing, prepared by the state board or regulatory body must include: 1) the licenser certification/registration number; 2) the initial date of licensure; 3) the expiration date of the license or renewal fee; 4) the means of obtaining licensure (i.e. exam, reciprocity, etc.) and 5) all closed disciplinary actions resulting in a violation or undetermined finding. Have you ever been subject to a <u>disciplinary action</u> taken by <u>any</u> (including Virginia) local, state or national regulatory body? No □								
12.	A. Have you ever been convicted or found guilty.United States of any <u>felony</u>?No 	·	n any jurisdiction of the						
	Yes If yes, complete the Criminal Conviction Reporting Form.								
	B. Have you ever been convicted or found guilty. United States of any <u>misdemeanor</u> ?	, regardless of the manner of adjudication, ir	n any jurisdiction of the						
	No	onviction Reporting Form.							
13.	By signing this application, I certify the following sta	tements:							
. •	I am aware that submitting false information application will delay processing and may lead	or omitting pertinent or material information	in connection with this						
	I will notify the Board of any changes to the light of the state of the light	the information provided in this application	nrior to receiving the						

- - I will notity the Board of any changes to the information provided in this application prior to receiving the requested license, certification, or registration including, but not limited to any disciplinary action or conviction of a felony or misdemeanor (in any jurisdiction).
 - I authorize the Department to verify information concerning me or any statement in this application from any person, or any source the department may desire. I also agree to present any credentials or documents required or requested by the Department.

- I authorize any federal, state or local government agency, current or former employer, or other individual or business to release information which may be required for a background investigation.
- I have read, understand and complied with all the laws of Virginia related to this profession under the provisions of Title 54.1, Chapter 5, of the Code of Virginia and the Virginia Board for Asbestos, Lead and Home Inspectors; Virginia Asbestos Licensing Regulations.

Signature	Date	