

9. **Asbestos Project Designer** - Provide the following information for Training, Education and Experience:

- A. Have you successfully completed an EPA or Board-approved initial accredited asbestos project designer training program and all subsequent EPA or Board-approved refresher accredited asbestos project designer training programs?

No ☐

Yes ☐ If yes, attach a copy of the training course completion certificate showing successful completion of the programs.

- B. Which of the following experience and/or education requirements have you met to qualify for this license type?

☐ Hold a Master's or Bachelor's degree in engineering, architecture, industrial hygiene, environmental science or studies, physical science, or a related field, and shall have a minimum of (3) three months of experience

☐ Hold a Master's or Bachelor's degree in engineering, architecture, industrial hygiene, environmental science or studies, physical science, or a related field, and shall have completed a minimum of (5) five project designs

☐ Hold an Associate's degree in engineering, architecture, industrial hygiene, environmental science or studies, physical science, or a related field, and shall have a minimum of (6) six months of experience

☐ Hold an Associate's degree in engineering, architecture, industrial hygiene, environmental science or studies, physical science, or a related field, and shall have completed a minimum of (7) seven project designs

☐ Hold a High School diploma or equivalent and shall have a minimum of (12) twelve months of experience

☐ Hold a High School diploma or equivalent and shall have completed a minimum of (10) ten project designs

Required Attachments: Attach a completed Education Verification Application and an Experience Verification Application.

10. Do you hold a current or expired environmental remediation license, certification or registration issued by any jurisdiction (excluding Virginia)?

No ☐

Yes ☐ If yes, complete the following table and attach an original Certification of Licensure/Letter of Good Standing[♦] from each jurisdiction.

State/Jurisdiction	License, Certification or Registration Number	Expiration Date

- ♦ Certifications of Licensure/Letter of Good Standing, prepared by the state board or regulatory body must include: 1) the license/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.

11. Have you ever been subject to a **disciplinary action** taken by any (including Virginia) local, state or national regulatory body?

No ☐

Yes ☐ If yes, complete the [Disciplinary Action Reporting Form](#).

12. A. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any **felony**?

No ☐

Yes ☐ If yes, complete the [Criminal Conviction Reporting Form](#).

B. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any **misdemeanor**?

No ☐

Yes ☐ If yes, complete the [Criminal Conviction Reporting Form](#).

13. By signing this application, I certify the following statements:

- I am aware that submitting false information or omitting pertinent or material information in connection with this application will delay processing and may lead to license revocation or denial of license.
- I will notify 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 _____