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 PROJECT DESIGNER 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>curren</i> the Virginia Board	•	•		•				ional a	nd Occup	oational Reg	ulation or from
	Virginia License								Ex	piration [	Date	
1.	Full Legal Nam	e (As it appe	ars on your g	overnm	ent issue	ed ID o	other I	egal docı	ımentati	on.)		
	Last (required)		Fir	st (requir	red)			Mi	ddle			Generation
2.	Provide at least	t <u>one</u> of the fo	ollowing ider	ntificatio	n numb	oers*:						
	Social Se	curity Numbe	<b>r</b> and/or					-	-			
	<u> Virginia</u> □	MV Control Nu	umber									
	* State law requ	ne identification nu uires every applica onwealth to provid	ant for a license,	certificate	, registrati	on or oth	er author	zation to en	gage in a	business, tra	ade, profession	or occupation issued
3.	Date of Birth	MM/DD/	YYYY	(Must b	e at leas	st 18 ye	ars of a	ige.)				
4.	Maiden or Form	ner Name(s)										
5.		s (PO Box ac g address will be on the license.	. ,	City							State	Zip Code
6.	Street Address	(PO Box not	accepted)		Check I	nere if St	eet Addr	ess is the <u>sa</u>	ame as the	e Mailing Add	dress listed abov	e.
	PHYSICAL	. ADDRESS RE	QUIRED									
				City							State	Zip Code
7.	Contact Number	ers	Driman, Tala				A 14	mata Talanh				
8.	Email Address		Primary Tele	pnone			Alte	nate Teleph	ione		F	ax
0.	Liliali Addices		Email addre	ss is con	sidered a	a public	record a	nd will be	disclosed	l upon requ	est from a thir	d party.
OFFIC		FEE	TRANS CODE		ENTITY #	ŧ			FILE #/LIC	ENSE#		ISSUE DATE
ONL			1020				330	)5				

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 <u>asbestos project desig</u> training program <u>and</u> all subsequent EPA or Board-approved refresher accredited <u>asbestos project desig</u> training programs?  No										
	Yes If yes, attach a copy of the training course completion certificate showing successful composition of the programs.	oletion									
	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, environr science or studies, physical science, or a related field, and shall have a minimum of (3) three n of experience										
	Hold a Master's or Bachelor's degree in engineering, architecture, industrial hygiene, environr science or studies, physical science, or a related field, and shall have completed a minimum	Hold a Master's or Bachelor's degree in engineering, architecture, industrial hygiene, environmental science or studies, physical science, or a related field, <u>and</u> shall have completed a minimum of (5) five project designs									
	Hold an Associate's degree in engineering, architecture, industrial hygiene, environmental scie studies, physical science, or a related field, and shall have a minimum of (6) six mon	Hold an Associate's degree in engineering, architecture, industrial hygiene, environmental science or studies, physical science, or a related field, <u>and</u> shall have a minimum of (6) six months of experience									
	Hold an Associate's degree in engineering, architecture, industrial hygiene, environmental scie studies, physical science, or a related field, <u>and</u> shall have completed a minimum of (7) seven processes.	Hold an Associate's degree in engineering, architecture, industrial hygiene, environmental science or studies, physical science, or a related field, <u>and</u> shall have completed a minimum of (7) seven project designs									
	<ul> <li>Hold a High School diploma or equivalent <u>and</u> shall have a minimum of (12) twelve mon experience</li> <li>Hold a High School diploma or equivalent <u>and</u> shall have completed a minimum of (10) ten processing</li> <li>Required Attachments: Attach a completed <u>Education Verification Application</u> and an <u>Experimental Education Verification Application </u></li></ul>										
10.	Do you hold a <u>current</u> or <u>expired</u> 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	te									
	<ul> <li>Certifications of Licensure/Letter of Good Standing, prepared by the state board or regulatory body must include: 1) the licencertification/registration number; 2) the initial date of licensure; 3) the expiration date of the license or renewal fee; 4) the means obtaining licensure (i.e. exam, reciprocity, etc.) and 5) all closed disciplinary actions resulting in a violation or undetermined finding.</li> </ul>										
11.	Have you ever been subject to a <u>disciplinary action</u> taken by <u>any</u> (including Virginia) local, state or national regulatory?  No  Yes If yes, complete the <u>Disciplinary Action Reporting Form.</u>	ılatory									
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 <a href="felony">felony</a> ?										
	No  Yes If yes, complete the <u>Criminal Conviction Reporting Form.</u>										

<ul> <li>B. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any <u>misdemeanor</u>?</li> <li>No</li></ul>							
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 a felony or misdemeanor (in any jurisdiction).							
<ul> <li>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.</li> </ul>							
<ul> <li>I authorize any federal, state or local government agency, current or former employer, or other individual o business to release information which may be required for a background investigation.</li> </ul>							
<ul> <li>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.</li> </ul>							
Signature Date							

13.