Official Use Only
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Check/MO #:
Date:

VERMONT
DEPARTMENT OF HEALTH
ENVIRONMENTAL HEALTH
Asbestos and Lead Regulatory Program
108 Cherry Street, P.O. Box 70
Burlington, VT 05402

Application for Asbestos Licensure of Individuals

Send by **EMAIL** to: AHS.VDHALRPGeneral@Vermont.gov

- ☐ Completed, signed and dated application with required documentation attached
- ☐ High-quality color photo to be used for photo ID

Send by **MAIL** to above address:

- ☐ Copy of the first page of the application
- ☐ Completed tax form Applicant's Statement Regarding Child Support and Taxes
- ☐ License fee payable to the Vermont Department of Health

DO NOT email scans of payment or tax form.

Contact the Health Department with questions at:
800-439-8550 or AHS.VDHALRPGeneral@vermont.gov.

1. Your Information:

First Name:		Last Name:			
Ph:		Email:			
Mailing Address:		City:		State:	Zip:
Gender: ◯ Male ◯ Female ◯ Other:		Height:		Weight:	
Date of Birth:		Hair Color:		Eye Color:	

2. Which licenses are you applying for? (Check all that apply)

Worker Contractor	☐	$60.00
Supervisor Contractor	☐	$120.00

If Renewal:
License # _____ Exp Date _____
License # _____ Exp Date _____

Inspector Contractor	☐	$180.00 Initial	☐	$150.00 *
Inspector Management Planner	☐	$180.00 Initial	☐	$150.00 *
Project Monitor Contractor	☐	$180.00 Initial	☐	$150.00 *
Project Designer Contractor	☐	$180.00 Initial	☐	$150.00 *

*If you are getting more than one type of consultant license, the first costs $180 and any others cost a reduced fee of $150. For the reduced fee to be valid, all consultant licenses applied for must be on the same form.

Analyst Contractor (Check all that apply)	☐ $60.00	☐ PCM ☐ TEM-Air ☐ Field Analyst ☐ PLM ☐ TEM-Bulk

3. Your Company's Information:

Company Name:		Ph:		Fax:	
Company Address:		City:		State:	Zip:
Company Contact Name:		Email:			

To which address should correspondence be sent? ◯ Mailing ◯ Company +
Note: Address where correspondence is sent may be publicly listed

4. Do you currently have licenses or certifications in asbestos-related services in other states?
Yes ◯ No ◯ If yes, provide a photocopy or scan of each

5. Your Education and Training
Provide documentation and include separate pages as needed.

School	Major & Minor	Date Attended	Academic Degree Earned	Graduation Date

(Refer to the Vermont Regulations for Asbestos Control for your discipline's requirements.)

Have you taken Vermont/EPA approved trainings required for your licensing discipline?
Provide a complete training history by sending copies of all initial and subsequent refresher training certificates. Provide a copy of any non-accredited course syllabus.
☐ Documentation included with application

Are your licensing disciplines analytical?
Provide the most recent relevant proficiency round results from the test provider. If only one person's answers are sent in for results, provide the report from the proficiency test provider and your answers.
☐ Documentation included with application

Are you a consultant? Do you hold any professional credentials?
☐ P.E. ☐ C.I.H. ☐ R.A. ☐ Other (specify)

6. Your Work Experience
Do you meet work experience requirements for your licensing discipline?
Submit complete and detailed relevant employment history, including employers, duties, dates of employment, and percent of time spent performing relevant duties. (A copy of your resume with all relevant information is enough.)
☐ Documentation included with application

Are you applying as an asbestos supervisor for the first time?

Provide documentation of possessing at least four months of experience in asbestos abatement activities inside a containment area. Four months is defined as sixteen 40-hour weeks, totaling 640 hours. This must be in the form of a project list with total hours of containment per job, e.g. Class I and/or Class II. (see VRAC Section 2.2.3 B.)

☐ Documentation included with application

7. Your Enforcement History

Have you had any enforcement actions by a state or the federal government?

Yes ◯ No ◯

Have you ever been found to be in violation of any law or regulations regarding asbestos abatement by any state (including Vermont) or federal agency or department?

Yes ◯ No ◯

Are there any outstanding actions or investigations regarding asbestos abatement initiated by any state (including Vermont) or federal agency or department pending against you?

Yes ◯ No ◯

If the answer to any of these is yes, even if you disagree with those actions, provide detailed information about the action including the agency taking action and copies of enforcement correspondence. Include your response to this correspondence, and what procedures you have developed to ensure these violations do not occur again.

If you are a first-time applicant, send documentation for the last two years.

If you are renewing a license, send documentation for the past year.

☐ Documentation included with application

8. Do you, or any individual with financial interests in you have any financial or professional involvement in any other individual or firm licensed under the Vermont Regulations for Asbestos Control?

Yes ◯ No ◯ If yes, describe relationship in detail on additional sheets.

I certify that I have read and understand the Vermont Regulations for Asbestos Control. I certify that this application is prepared in agreement with the Vermont Regulations for Asbestos Control and that all information provided, including any supplements, are true and correct to the best of my knowledge and belief. I agree that as a condition of being granted a license, I will notify the Asbestos and Lead Regulatory Program of any change of address or employer within 90 days of the change.

Your signature

Date you are signing

INDIVIDUAL CHECK SHEET FOR ASBESTOS LICENSURE

Check your application package carefully to ensure it is complete. If your application is incomplete, it will either delay processing or be denied. Any fees you sent will not be returned.

☐ 1) Did you sign and date the application and Applicant's Statement Regarding Child Support and Taxes form?

☐ 2) Did you check the type(s) of license(s)?

☐ 3) Did you submit the proper licensure fee(s)? Is the check made out to the Vermont Department of Health?

☐ 4) Did you submit documentation of formal education?

☐ 5) Did you include all Vermont/EPA approved training and refresher training course certificates?

☐ 6) For consultant license applications (inspectors, management planners, project monitors, and project designers), did you provide documentation of relevant professional credentials?

☐ 7) For analyst license applications, did you submit results of personal proficiency rounds (i.e. AAR or NIOSH PAT rounds)?

☐ 8) Did you provide relevant employment history (including project start and finish dates, locations, and contact person)?

☐ 9) Did you provide documentation of enforcement actions submitted including all previous and current year's actions? Have you provided a detailed explanation to these actions? At least two years enforcement history is required for initial applicants, past year only if a renewal applicant.

☐ 10) Have you sent a high quality, close-up color picture for the photo ID card? Passport photos are acceptable. Polaroid pictures will not be accepted.

Submit completed application and attachments to:

AHS.VDHALRPGeneral@vermont.gov

Submit first page of application, tax form, and fee to:

Vermont Department of Health
Environmental Health
Asbestos and Lead Regulatory Program
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Burlington, VT 05402