

Official Use Only
 Paid: \$
 Check/MO #:
 Date:



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

Application for Lead 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 at (800) 439-8550 or AHSVDHGeneral@Vermont.gov with any questions.

1. Which licenses are you applying for?

(Check all that apply)

If Renewal:

License #

Exp Date

License #

Exp Date

License #

Exp Date

Lead Worker (Check all that apply)	\$60	Target Housing	Superstructures
Lead Supervisor (Check all that apply)	\$120	Target Housing	Superstructures

Lead Inspector Technician	\$180
Lead Inspector Risk Assessor	\$180
Lead Project Designer	\$180

2. 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:	

3. Your Company's Information:

Company Name:	Ph:	Fax:	
Address:	City:	State:	Zip:
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 lead-based paint related services in other states?

Yes No If yes, provide a photocopy or scan of each

4. Your Education and Training

Provide documentation and include separate pages as needed.

Are you applying for lead supervisor target housing, lead inspector, or lead inspector risk assessor? Taking an EPA third party exam is required.

Exam results included with application

Copy of exam results on file

School	Major & Minor	Date Attended	Academic Degree Earned	Graduation Date

(Refer to the [Vermont Regulations for Lead 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 you a consultant? Do you hold any professional credentials?

P.E. C.I.H. R.A. Other (specify)

5. 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

6. 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 lead-based paint abatement by any state (including Vermont) or federal agency or department?

Yes No

Are there any outstanding actions or investigations regarding lead-based paint abatement initiated by any state (including Vermont), 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.

Documentation included with application

7. 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 lead Control?](#)

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

I certify that I have read and understand the [Vermont Regulations for Lead Control](#). I certify that this application is prepared in agreement with the [Vermont Regulations for Lead 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 LEAD CERTIFICATION

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 licensure of consultant type applications, did you provide documentation of relevant professional credentials provided?
- 7) Did you provide relevant employment history (including project start and finish dates, locations, and contact person)?
- 8) 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
- 9) 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
108 Cherry Street, P.O. Box 70
Burlington, VT 05402