



U.S. ENVIRONMENTAL PROTECTION AGENCY

Form Approved OMB No. 2070-0195 Expires 1/31/21

**APPLICATION FOR INDIVIDUALS
TO CONDUCT LEAD-BASED PAINT ACTIVITIES**

Important: Consult the instructions provided for individuals applying for certification to conduct lead-based paint activities to complete this form. Firms should use the Application for Firms instead of this form. **Please type or print responses in black or blue ink only.**

A. General Information (All applicants)

Select one of the following application types:

Initial certification application

Re-certification application

Adding jurisdiction[s] to certification/amending certification

Replacement of a certificate

Official Use Only

**For information on EPA and other
Lead Programs, see:
<http://www.epa.gov/lead>**

Indicate the discipline(s) for which you seek certification or re-certification and all EPA-run jurisdiction(s) in which you intend to perform lead-based paint activities. For discipline-specific responsibilities, please see the instructions. An EPA-run jurisdiction includes an EPA-run state, U.S. territory, or all Indian tribal land(s) in any one EPA Region. You will be eligible for certification to work only in those EPA-run jurisdiction(s) you specify below. Attach additional sheets of paper, as necessary.

The fee you must pay depends on the number of disciplines and EPA-run jurisdiction(s) in which you plan to conduct lead-based paint activities. See the fees schedule in the instructions to determine your fee. The total fee listed below should include fees calculated on any additional sheets.

I=Initial R=Refresher	Inspector		Supervisor		Risk Assessor		Project Designer		Abatement Worker		Fee
	I	R	I	R	I	R	I	R	I	R	
1 st EPA-run jurisdiction* (pay base certification fee only)											\$
2 nd EPA-run jurisdiction*											\$

Check here if you are listing additional EPA-run jurisdiction[s]
List each additional jurisdiction as necessary. (Each additional jurisdiction is \$35 per discipline, per jurisdiction) \$

Certification exam fee (\$70 each) (Does not apply to project designers, abatement workers, or applicants applying under Section C). \$

Total Fee: \$

*See the definition of EPA-run jurisdiction[s] and the fee examples in the instructions.
For current listing of EPA-run jurisdictions, see www.epa.gov/lead or call 1-800-424-LEAD.

B. Applicant Information (All applicants)

Check here if you are an employee of a Federally-recognized Indian Tribe.

Mr. Mrs. Ms. Name: Last First Middle

Previous and/or Maiden Name(s), if applicable:

Business Phone #: ext. Home Phone #:

*In the event that we cannot reach you, please list another contact name and number (optional):

Home Address: Street Address, Suite Number (Please no P.O. Box) City State Zip Code

Company Name and Address: Name Street Address, Suite Number City State Zip Code

Applicant's E-mail Address (optional):

To which address should correspondence be sent? Home Company Other (please attach)

Date of Birth: _____
Month/Day/Year

Race/Ethnicity (optional): _____

Country of Legal Residence: _____

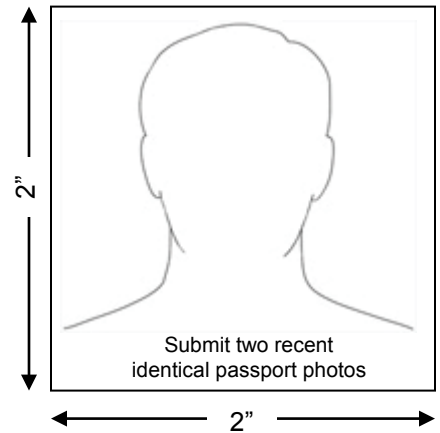
Gender: Male Female

Height: _____ Weight: _____
Feet Inches Pounds

Eye Color: _____

Hair Color: _____

Submit two identical passport photographs of you alone, recent enough to be a good likeness (normally taken within the last 6 months). As shown in the example to the right, photographs should be 2 x 2 inches in size with an image of your head and shoulders taking up the majority of the area. Photographs must be clear, front view, full face, taken in normal street clothing without a hat or dark glasses in front of a white or off-white background. Retouched, digital, and profile images are not acceptable.

**C. Reciprocity (Initial Certification applicants only)**

Do you hold a current lead-based paint certification issued by an EPA-authorized state, U.S. Territory, or Indian tribe? Yes No

If you answered Yes, please complete Section C and skip Sections D and E. Also, attach a copy of your valid certificate and license. If you answered No, please skip Section C and complete Sections D and E.

Inspector: _____ State/Tribe: _____

Expiration Date: _____

Supervisor: _____ State/Tribe: _____

Expiration Date: _____

Risk Assessor: _____ State/Tribe: _____

Expiration Date: _____

Project Designer: _____ State/Tribe: _____

Expiration Date: _____

Abatement Worker: _____ State/Tribe: _____

Expiration Date: _____

D. Training (Initial and Re-certification applicants)

Answer the following items about the lead-based paint training course you received for each discipline for which you are seeking certification or re-certification. Attach additional sheets of paper as necessary.

Discipline: _____

Name of Training Program: _____
Name of organization that taught course

Training Program Address: _____
Street Address, Suite Number City State Zip Code

Training Program Phone #: _____ ext. _____ Date Training Completed: _____
Month/Day/Year

If training was conducted in a language other than English, please specify language: _____

Training Certificate Identification Number: _____

Please check the type of test you took: Course test(s) and/or hands-on assessment or Proficiency test

E. Experience and Education (Initial Certification for Supervisor, Project Designer, or Risk Assessor only)

If applying for Inspector or Worker, go to Section F.

For each discipline, check the combination you are using below:

Supervisor: (A or B must be checked.)

- A.** 1 year experience as certified lead abatement worker **B.** 2 years experience in building trades or related field*

*Examples of related fields include lead, asbestos, environmental remediation work, or construction.

Project Designer (A or B must be checked.)

- A.** Bachelors degree in engineering, architecture, or related profession, AND
1 year experience in building construction and design or related field*
- B.** 4 years experience in building construction and design or related field*

*Examples of related fields include lead, asbestos, environmental remediation work, or construction.

Risk Assessor: (A, B, C or D must be checked.)

- A.** Bachelors degree AND
1 year experience in related field*
- B.** Associates degree AND
2 years experience in a related field*
- C.** Certification as industrial hygienist, professional engineer, registered architect, OR
Certification in related engineering/health/environment field (e.g., safety professional, environmental scientist)
- D.** High School/GED AND
3 years experience in related field*

*Examples of related fields include lead, asbestos, environmental remediation work, or construction.

For experience combinations checked above, answer each of the following (Attach additional sheets of paper, as necessary):

Requested Discipline: Current Occupation Title: Company Name:

Dates employed: Documentation attached: Resume Reference Letter Summary of work

For education checked above, answer each of the following (Attach additional sheets of paper, as necessary):

School: Major/Course of study: Degree: Year:

Documentation attached: Diploma Transcript

F. Lead-Based Paint Activity Violations (All applicants)

Do you have any past, present, or pending lead-based paint activity violations Yes No

If yes, please attach a written explanation.

G. Additional Information (All applicants)

Use the following space for any additional information or comments that you feel are relevant and want EPA to consider with your application. Attach additional sheets of paper, as necessary.

H. Signature (All applicants)

Privacy Act Statement: This statement is provided pursuant to the Privacy Act of 1974, 5 U.S.C. §552a. The authority for collecting this information is 40 C.F.R. Part 745, and 15 U.S.C. §§2682 and 2684. The information collected on this form will be used to establish the applicant's eligibility for certification to conduct lead based paint activities in target housing and child occupied facilities. Disclosure of this information is voluntary, however, the failure to provide this information may delay or prevent an applicant's certification. This information may be disclosed in appropriate and limited circumstances to: EPA employees, contractors, grantees or others when performing duties that are compatible with the purpose for which this information is collected and when this information is necessary to complete the task; a member of Congress in response to a request made with your consent and on your behalf; to appropriate law enforcement agencies responsible for investigating, enforcing, prosecuting or implementing specific statutes, codes or regulations and this information is relevant to that responsibility; an appropriate adjudicative body when such disclosure is compatible with the purpose for which this information is collected and the EPA or the United States has an interest in the proceeding; and the Department of the Treasury, the General Services Administration, the General Accounting Office and other Federal, State, and Local Agencies for authorized activities related to this information.

Please sign your name and write the date in the blanks below if you understand and agree with the following statement: I hereby attest and affirm that the information included on this application, including any attachments, is true and accurate to the best of my belief and knowledge. I acknowledge that any certification issued pursuant to this application, including any attachments, will be subject to revocation if issuance was based on incorrect or inadequate information that materially affected the decision to issue the certification. I also attest and affirm that I will maintain my certification(s) according to 40 CFR § 745.226, follow work practice standards according to 40 CFR § 745.227, and conduct lead-based paint activities only in those disciplines and geographical areas in which I have received certification.

Date Signed

Applicant's Signature

(Please sign legibly within the boundaries of the box above.)

Before you mail your application and certification fee, make sure that you have:

Filled out all applicable sections of the application

Signed and dated the application

Made a copy of your application for your files

Enclosed two identical passport photos of yourself

Enclosed a copy of your course completion certificate(s) Enclosed documentation of your education, experience, and professional certification(s), if necessary

Enclosed any other documentation needed -- see the instructions for more information

Enclosed the appropriate certification fee(s)(check or money order)

Printed "Lead Program User Fees" on the check or money order

Submitted \$70 certification exam fee if applying for initial certification for Inspector, Supervisor, or Risk Assessor

For more information, see the fees section in the instructions

Mail the original completed application, supporting materials, and the certification fee to:

U.S. EPA
P.O. Box 14417
Washington, DC 20044-4417

This collection of information is approved by OMB under the Paperwork Reduction Act, 44 U.S.C. 3501 et seq. (OMB Control No. 2070-0195). Responses to this collection of information are **mandatory (40 CFR 745)**. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The public reporting and recordkeeping burden for this collection of information is estimated to **range from 0.5 to 3 hours** per response. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates and any suggested methods for minimizing respondent burden including through the use of automated collection techniques to the Director, Regulatory Support Division, U.S. Environmental Protection Agency (2821T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.