Commonwealth of Virginia
Department of Professional and Occupational Regulation
PO Box 29570
Richmond, Virginia 23242-0570
(804) 367-8595
www.dpor.virginia.gov



Board for Asbestos, Lead, and Home Inspectors Individual - Asbestos License Renewal Form Fee \$25.00

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 renewal package. RENEWAL FEES ARE NOT REFUNDABLE.

Select **one** of the following for license renewal:

	X License Type	Х	License Type]
	3301 - Asbestos Worker 3302 - Asbestos Supervisor		3304 - Asbestos Management Planner	-
			3305 - Asbestos Project Designer	1
	3303 - Asbestos Inspector		3309 - Asbestos Project Monitor	
4				_
1.	Provide your Asbestos License information belo	W:		+
	A. Virginia License Number 3 3		Expiration Dat	e [*]
	B. Have you completed the Asbestos re	resher	raining* course required for this rene	wal period?
	No If no, DPOR will not be a	able to re	enew your license until the certificate is	s received.
	Yes If yes, attached your cer	tificate s	howing successful completion of the r	equired training.
	Renewal Fee and training certificate are <u>not</u> received with training certificate are not received within twelve months of	,	·	
	·			
2.	Full Legal Name (As it appears on your government)	ent issue	d ID or other legal documentation.)	
	Last (required) First (requi	.ch/	Middle	Generation
2		-		Generation
3.	Provide at least <u>one</u> of the following identification	III HUHID	ers": 	
	Social Security Number and/or			
	<u>Virginia</u> DMV Control Number			
	<u>Virginia</u> DMV Control Number➤ Enter the same identification number as used on examina	tion, previo	us applications or licenses on file with the departmer	it.
		, registratio	n or other authorization to engage in a business, trad	de, profession or occupation issued
4.	 Enter the same identification number as used on examina State law requires every applicant for a license, certificate by the Commonwealth to provide a social security number Contact Numbers 	, registratio	n or other authorization to engage in a business, trac I number issued by the <i>Virginia</i> Department of Moto	de, profession or occupation issued
	Enter the same identification number as used on examina State law requires every applicant for a license, certificate by the Commonwealth to provide a social security number Contact Numbers Primary Telephone	, registratio or a contro	n or other authorization to engage in a business, trace I number issued by the <i>Virginia</i> Department of Moto Alternate Telephone	de, profession or occupation issued
4. 5.	Enter the same identification number as used on examina * State law requires every applicant for a license, certificate by the Commonwealth to provide a social security number Contact Numbers Primary Telephone By signing this application, I certify the following	registratio or a contro	n or other authorization to engage in a business, trace I number issued by the <i>Virginia</i> Department of Moto Alternate Telephone	de, profession or occupation issued or Vehicles. Fax
	Enter the same identification number as used on examina State law requires every applicant for a license, certificate by the Commonwealth to provide a social security number Contact Numbers Primary Telephone	registratio or a contro g statem	n or other authorization to engage in a business, trace I number issued by the <u>Virginia</u> Department of Moto Alternate Telephone ents: pmitting pertinent or material information	de, profession or occupation issued or Vehicles. Fax on in connection with this

OFFICE	DATE	FEE	TRANS CODE	ENTITY #	FILE #/LICENSE #	ISSUE DATE
USE ONLY			2020		33	

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	

Important Reminders:

- Licensees must notify the board of any <u>Name or Address changes</u> within 30 days of the change. Forms can be accessed on our DPOR website: <u>www.dpor.virginia.gov/FormsAndApplications/</u>
- The Board's regulations may be accessed on the DPOR website: www.dpor.virginia.gov/Boards/ALHI/