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 Vi



Virginia Board for Asbestos, Lead, and Home Inspectors Asbestos Analytical Laboratory License Renewal/ Branch Office Renewal Form

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:

			Ociect <u>one</u> (n the following.			
		X	License Type		Fee		
			Asbestos Analytical La	b License Renewal	\$65.00	-	
			Branch Office Renewa		\$55.00	-	
1.	Provide your Asbesto Virginia License Nur * A \$35.00 late fee wi	mber	Laboratory/Branch of 3 3 yment is not received wi		Ex	piration Date*	
2.	Name of Firm/Sole Pr	oprietor					
3.	Trade, "Doing Busine	ss As" (DBA	A) or Fictitious Name				
4.	Street Address (PO B PHYSICAL ADDR		. ,				
			City			State	Zip Code
5.	Contact Numbers	Pri	mary Telephone	Alternate T	elephone		
6.	Email Address						
		Em	ail address is considered a	a public record and wil	l be disclose	ed upon request from a thi	rd party.
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- 7. 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 of 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.

FINAL - FEBRUARY 2020

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

- 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.

Print Name	Title		
Signature		Date	

Important Reminders:

- Licensees must notify the board of any <u>Name and 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: <u>www.dpor.virginia.gov/Boards/ALHI/</u>
- Submit a photocopy of current accreditation for the type(s) of Analysis performed by this Laboratory.