



**Board for Asbestos, Lead and Home Inspectors  
 LEAD - EXPERIENCE VERIFICATION APPLICATION  
 No Fee Required**

*Lead Supervisor, Risk Assessor, and Project Designer applicants only.*

**Experience Verification:**

**Section A** - should be completed by the applicant.

**Section B** - should be completed by the supervisor or another individual who will verify the applicant's work experience.

**Section A: Applicant**

1. Applicant's Full Legal Name (As it appears on your government issued ID or other legal documentation.)

Last (required)	First (required)	Middle	Generation

2. Provide at least **one** of the following identification numbers\*:

**Social Security Number** and/or

--	--	--	--	--	--	--	--	--	--	--

**Virginia DMV Control Number**

--	--	--	--	--	--	--	--	--	--	--	--

> Enter the same identification number as used on examination, previous applications or licenses on file with the department.

\* State law requires every applicant for a license, certificate, registration or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a social security number or a control number issued by the **Virginia** Department of Motor Vehicles.

3. Mailing Address

\_\_\_\_\_

City	State	Zip Code

4. Check the **one** type of license you are requesting:

Risk Assessor       Project Designer       Supervisor

5. Applicant's Job Title

\_\_\_\_\_

6. Dates of Employment From: \_\_\_\_\_ To: \_\_\_\_\_  
MM/DD/YYYY                      MM/DD/YYYY

7. Provide detailed description of applicant's work:

8. Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Section B: Supervisor or Verifier of Work Performance**

*You may duplicate this form to accommodate all your references.*

1. Employer's Name \_\_\_\_\_

2. Supervisor's or Verifier's Name \_\_\_\_\_

\_\_\_\_\_  
Last First Middle Generation

3. Employer's/Verifier's Street Address \_\_\_\_\_

\_\_\_\_\_  
City State Zip Code

4. Contact Numbers \_\_\_\_\_

Primary Telephone Alternate Telephone Fax

5. Is the information provided by the applicant correct in questions A.5, A.6, and A.7?

Yes

No  If no, please explain below.

6. I, the undersigned, certify that the foregoing statements and answers are true, and I have not suppressed any information that might affect the decision to approve this application.

Supervisor/Verifier's Signature \_\_\_\_\_ Date \_\_\_\_\_