



**Board for Asbestos, Lead, and Home Inspectors
 Contractor - Asbestos & Lead License Renewal Form**

A check or money order payable to the **TREASURER OF VIRGINIA**,
 or a completed [credit card insert](#) must be mailed with your renewal package.
RENEWAL FEES ARE NOT REFUNDABLE.

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

X	License Type	Fee
<input type="checkbox"/>	3306 - Asbestos Contractor	\$70.00
<input type="checkbox"/>	3358 - Lead Abatement Contractor	\$70.00

1. Provide your License information below:

Virginia License Number

3	3								
---	---	--	--	--	--	--	--	--	--

 Expiration Date* _____

A \$35.00 late fee will apply if payment is received 30 days past expiration date, bringing total cost to \$105.00 for renewal period.

2. Business Entity/Sole Proprietor Name _____

3. Select **one** of the following and provide the information below.

Business Federal Employer Identification Number (FEIN)*

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

 -

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

Federal Employer Identification Number (12-3456789)

* State law requires every applicant, *who is not a sole proprietor*, to provide a federal employer identification number. *Sole proprietors must provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.*

Sole Proprietor's/Individual's Social Security Number **or**

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

 -

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

 -

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

Social Security or Virginia DMV Number (123-45-6789)

Virginia Department of Motor Vehicles Control Number*

* 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.

4. Contact Numbers

_____ Primary Telephone _____ Alternate Telephone _____ Fax

5. I, the undersigned, certify that the foregoing statements and answers are true, and I have not suppressed any information that might affect the Board's decision to approve this renewal application. I certify that I will notify the Department if I am subject to any disciplinary action or convicted of a felony or misdemeanor (in any jurisdiction) prior to receiving the requested license. I certify that I have read, understood and complied with all the laws of Virginia under the provisions of Title 54.1, Chapter 5, of the Code of Virginia and the regulations of the Virginia Board for Asbestos, Lead and Home Inspectors.

Signature _____ Date _____

Print Name _____

Title _____

Important Reminders:

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

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