



**Board for Asbestos, Lead and Home Inspectors**  
**ASBESTOS WORKER LICENSE APPLICATION**  
**Fee \$80.00**

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

1. Name \_\_\_\_\_  
Last First Middle Generation

2. Provide **one** of the following identification numbers.  
 Social Security Number or  Virginia DMV 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.

3. Date of Birth \_\_\_\_\_ (Must be at least 18 years of age.)  
MM/DD/YYYY

4. Mailing Address (PO Box accepted) \_\_\_\_\_  
 If a mailing address is submitted, the mailing address will be printed on the license.  
City State Zip Code

5. Street Address (PO Box not accepted)  Check here if Street Address is the same as the Mailing Address listed above.  
**PHYSICAL ADDRESS REQUIRED**  
 \_\_\_\_\_  
City State Zip Code

6. Email Address \_\_\_\_\_

7. Contact Numbers \_\_\_\_\_  
Primary Telephone Alternate Telephone Fax

8. Do you hold a current or expired license, certification or registration issued by the Virginia Board for Asbestos, Lead and Home Inspectors or from the Virginia Department of Professional and Occupational Regulation?  
 No   
 Yes  If yes, provide your license/certification/registration number and expiration date.

License, Certification or Registration Number	Expiration Date

OFFICE USE ONLY	DATE	FEE	TRANS CODE	ENTITY #	FILE #/LICENSE #	ISSUE DATE
			1020		3301	

9. **Asbestos Worker** - Which of the following requirements are you using to qualify for this license type?
- Successful completion of EPA/AHERA or Board approved initial accredited asbestos worker training program and all subsequent EPA/AHERA or Board approved refresher accredited asbestos worker training programs
  - Successful completion of EPA/AHERA or Board approved initial accredited asbestos supervisor training program and all subsequent EPA/AHERA or Board approved refresher accredited asbestos supervisor training programs

**Required Attachments:** Attach a copy of the training course certificate showing successful completion of the programs. \*\*Training must be completed within the last 12 months preceding the date the department receives this application.

10. Do you hold a current or expired environmental remediation license, certification or registration issued by any jurisdiction (excluding Virginia)?

No

Yes  If yes, complete the following table and attach an original Certification of Licensure/Letter of Good Standing. ♦

State/Jurisdiction	License, Certification or Registration Number	Expiration Date

♦ Certifications of Licensure/Letter of Good Standing, prepared by the state board or regulatory body must include: 1) the license/certification/registration number; 2) the initial date of licensure; 3) the expiration date of the license or renewal fee; 4) the means of obtaining licensure (i.e. exam, reciprocity, etc.) and 5) all closed disciplinary actions resulting in a violation or undetermined finding.

11. Have you ever been subject to a disciplinary action taken by any (including Virginia) local, state or national regulatory body?

No

Yes  If yes, provide a certified copy of the final order, decree or case decision by a court or regulatory agency with lawful authority to issue such order, decree or case decision.

12. A. Have you ever been convicted in any jurisdiction of a **felony**? Any guilty plea or plea of nolo contendere must be disclosed on this application. Do not disclose violations that were adjudicated as a minor in the juvenile court system.

No

Yes  If yes, provide the information requested in # 12.C.

- B. Have you ever been convicted in any jurisdiction of a **misdemeanor**? Any guilty plea or plea of nolo contendere must be disclosed on this application. Do not disclose violations that were adjudicated as a minor in the juvenile court system.

No

Yes  If yes, provide the information requested in # 12.C.

- C. If you answered "yes" to either question #12.A. or #12.B., list the **felony** and/or **misdemeanor conviction(s)**. Attach your original criminal history record\* and any other information you wish to have considered with this application (i.e., information on the status of incarceration, parole or probation; reference letters; documentation of rehabilitation; etc.). If necessary, you may attach a separate sheet of paper.

\* Original criminal history record may be obtained by contacting the Virginia State police. Applicants with convictions from other jurisdictions, other than Virginia; must provide an original official criminal history record from each state/jurisdiction in which they have been convicted. Virginia residents may request complete criminal records from the Virginia State Police at [www.vsp.virginia.gov](http://www.vsp.virginia.gov) or by phone at 804-674-6718.

13. 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 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 Virginia Board for Asbestos, Lead and Home Inspectors; Virginia Asbestos Licensing Regulations.

Signature \_\_\_\_\_ Date \_\_\_\_\_