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



Board for Asbestos, Lead, and Home Inspectors Individual - Lead License Renewal Form

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		ck or money or																
or a completed <u>credit card insert</u> must be mailed with your renewal package. RENEWAL FEES ARE NOT REFUNDABLE.																		
Select <u>one</u> of the following for license renewal:																		
	X License Type X License Type								٦									
		Abatement Wo	rker	П	3356 -	Lead					Asse	essor		1				
		Abatement Sup			3357 -									+				
	-	Abatement Ins								, -				+				
4		<u> </u>																
1.	Provide your Virginia Lead Li		tion below:		<u> </u>	Т		۔ ا	!	_1:	- D	-1-*						
	A. Virginia License Nur					Щ.	<u>L</u>		xpira									
	B. Have you completed the <u>Lead refresher training</u> * course required for this renewal period?																	
	No If no,	DPOR will not	be able to re	new	your li	cense	e un	til the	e ce	rtific	cate	is re	е	ive	d.			
	Yes If yes	, attached you	r certificate sl	howii	ng suc	cessf	ul co	ompl	etio	n of	the	requ	Jire	ed t	raini	ing.		
	Renewal Fee and training certificate		•		-								-					e fee
	raining certificate are not received wi			-						-	u mi	ıst ap	pıy	TOT	a nev	N IICEI	nse.	
2.	Full Legal Name (As it appear	ars on your gove	ernment issued	l ID o	r other	legal	docu	ımen	tatio	n.)								
	Last (required)	First	(required)				Mic	ddle								- - -	Senera	ntion
3.	Provide at least one of the fo		. ,	*.			1411	adio									JOI 101 0	illon
٥.	Social Security Number	ŭ		15 .	$\overline{}$	1 1		\neg	Г	\neg	П	\neg	\neg	1				
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	<u>Virginia</u> DMV Control Nu	mber																
	Enter the same identification num																	
	State law requires every applicant by the Commonwealth to provide the commonwealth the c														n or o	occupa	ation is	ssuea
4.	Contact Numbers																	
		Primary Telephor	ne		Alte	rnate 1	Γeleph	none							Fax			
5.	By signing this application, I	certify the follo	wing stateme	ents:														
	I am aware that subm												in	cor	nec	tion	with	this
	application will delay p	processing and	d may lead to	licer	ise rev	ocati	on o	r de	nıal	ot li	cen	se.						
	 I will notify the Board 	d of any char	nges to the i	nforr	nation	prov	ided	in '	this	app	olica	tion	pr	ior	to r	recei	iving	the
requested license, certification, or registration including, but not limited to any disciplinary action or conviction o									n of									
	a felony or misdemea	nor (in any juri	sdiction).															
	 I authorize the Depar 				-	-		-										-
	person, or any source	•	•	sire.	I als	o ag	ree	to p	rese	ent a	any	crec	der	ntia	ls o	r do	cum	ents
	required or requested	by the Depart	ment.															
	DATE FEE	TRANS CODE	ENTITY#					FILE	#/LICE	NSE#			—		\neg	ISSI	JE DATI	E
USE		2020			33													

OFFICE	DATE	FEE	TRANS CODE	ENTITY#	FILE #/LICENSE #	ISSUE DATE
USE			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 Lead-Based Paint Activities 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/.