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 LEAD ABATEMENT INSPECTOR LICENSE APPLICATION Fee \$80.00

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 application package.

APPLICATION FEES ARE NOT REFUNDABLE.

		-	•	•		onal and Occupational R	egulation or the			
	Virginia Board fo Virginia Licer	Г	ead and Home	Inspectors (if app	olicable):	Expiration Date				
1.	Full Legal Name (As it appears on your government issued ID or other legal documentation.)									
	Last (required)		First (required)	Middl	e	Generation			
2.	Provide at leas	Provide at least one of the following identification numbers*:								
	Social Security Number and/or									
	<u>Virginia</u> [DMV Control Nu	umber							
	> Enter the san									
						ge in a business, trade, professior <u>a</u> Department of Motor Vehicles.	n or occupation issued			
3.	Date of Birth (Must be at least 18 years of age.)									
4.	Maiden or Former Name(s)									
5.	5. Mailing Address (PO Box accepted) The mailing address will be printed on the license. City State						Zip Code			
6.	Street Address (PO Box not accepted) PHYSICAL ADDRESS REQUIRED Check here if Street Address is the same as the Mailing Address listed above.						·			
			ā	City		State	Zip Code			
7.	Contact Number	ers								
0	·		Primary Telephor	ne Alternate Telephone		ie	Fax			
8.	Email Address Email address is considered a public record and will be disclosed upon request from a third party.									
9.	subsequent bo	ard-approved	mpleted a boa refresher accre	ard-approved ini edited <u>lead inspe</u>	tial accredited <u>lea</u> ctor training progra	ad inspector training p	rogram and all			
	DATE									
		FEE	TRANS CODE	ENTITY#		FILE #/LICENSE #	ISSUE DATE			

10.	Do you hold a <u>current</u> or <u>expired</u> environmental remediation license, certification or registration issued by any jurisdiction (excluding Virginia)? No Yes The transfer of the result of the r								
	Yes If yes, complete the following table and attach an original Certification of Licensure/L Standing from each jurisdiction:								
	3	State/Jurisdiction	License, Certification or Registration Number	Expiration Date					
		certification/registration number; 2) the ini	d Standing, prepared by the state board or regulatory body itial date of licensure; 3) the expiration date of the license or etc.) and 5) all closed disciplinary actions resulting in a violation	renewal fee; 4) the means of					
11.	body? No 🗌		on taken by any (including Virginia) local, state	e or national regulatory					
	Yes If yes, complete the <u>Disciplinary Action Reporting Form.</u>								
12.	A. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any <u>felony</u> ? Any plea of nolo contendere shall be considered a conviction.								
	No ☐ Yes ☐	If yes, complete the <u>Criminal Co</u>	onviction Reporting Form.						
	United St	• •	y, regardless of the manner of adjudication, in the marijuana convictions)? Any plea of note	• •					
	Yes [If yes, complete the <u>Criminal Co</u>	onviction Reporting Form.						
13.	, , ,	application, I certify the following sta							
		<u> </u>	n or omitting pertinent or material information ad to license revocation or denial of license.	in connection with this					
	 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 o a felony or misdemeanor (in any jurisdiction). 								
	 I authorize the Department to verify information concerning me or any statement in this application from a person, or any source the department may desire. I also agree to present any credentials or docume required or requested by the Department. 								
	 I authorize any federal, state or local government agency, current or former employer, or other individual 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 provis of Title 54.1, Chapter 5, of the Code of Virginia and the Virginia Board for Asbestos, Lead and Home Inspec Virginia Lead-Based Paint Activities Regulations. 								
	Signatur	е	Da	te					