

<b>FOR L&amp;I USE ONLY</b>
Cert #: _____
Date: _____

## ASBESTOS CONTRACTOR CERTIFICATION APPLICATION

**PLEASE TYPE OR PRINT NEATLY IN INK.**

<b>Type of Application</b>	Initial <input type="checkbox"/> Renewal <input type="checkbox"/> Pennsylvania Certification #: _____																												
<b>Contractor Information</b>	Company Name _____ Federal Employer Identification Number _____ Street Address _____ City _____ State _____ Zip Code _____ Telephone _____ Email _____ Contact Person _____ Title _____ Sole Proprietorship or Individual <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other (Specify) <input type="checkbox"/> _____  <p><b>If any of the above company information is different from the previous submittal, please submit a request to update the company information on company letterhead.</b></p> Is this Contractor currently certified to perform Asbestos abatement in any other state? Yes <input type="checkbox"/> No <input type="checkbox"/> If "Yes", list state(s) and attach copies of valid certifications/licenses issued: _____ _____ _____																												
<b>Actions taken against Contractor by regulatory agency</b>	Has the Contractor ever been cited, fined or otherwise been the subject of enforcement action by any federal or state agency for work practice or certification/licensure violations? Yes <input type="checkbox"/> No <input type="checkbox"/> If "Yes", provide the following information (attach a separate 8 1/2 x 11" sheet with this information, if necessary): <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 20%;">Date</th> <th style="width: 30%;">Violation</th> <th style="width: 30%;">Regulatory Agency</th> <th style="width: 20%;">Enforcement Action</th> </tr> </thead> <tbody> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> </tbody> </table>	Date	Violation	Regulatory Agency	Enforcement Action	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
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<b>Contractor (Individual) Certification</b>	Each company must have a certified Contractor (Individual). Provide the name and Pennsylvania certification number of the person in this firm who holds or will hold this certification.  <div style="text-align: right;">Name _____</div> <div style="text-align: right;">Pennsylvania Certification # _____</div>																												
<b>FOR L&amp;I USE ONLY</b>	Check #: _____ Amount: \$ _____ Bates #: _____																												

<b>Contractor Experience</b>	<p>If the Contractor has performed any Asbestos abatement projects in <b>Pennsylvania</b> within the last twelve (12) months, provide the following (attach a separate 8 ½ x 11" sheet with this information, if necessary):</p> <table border="0"> <thead> <tr> <th data-bbox="370 195 998 226">Name of Project/Building and Complete Address</th> <th data-bbox="1031 195 1507 226">Contact Person and Phone Number</th> </tr> </thead> <tbody> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> </tbody> </table>	Name of Project/Building and Complete Address	Contact Person and Phone Number	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____				
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<b>Contractor Work Performance Information</b>	<p>List equipment that will be used by this contractor to perform Asbestos abatement work, Ex. HEPA Vacuums, Air Monitoring Pumps, Respirators, etc. (attach a separate 8 ½ x 11" sheet with this information, if necessary):</p> <table border="0"> <tbody> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> </tbody> </table> <p>List name(s) and address(es) of landfills that will be utilized for Asbestos disposal.</p> <table border="0"> <tbody> <tr> <td data-bbox="370 1119 901 1150">1. _____</td> <td data-bbox="954 1119 1507 1150">2. _____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> </tbody> </table>	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	1. _____	2. _____	_____	_____	_____	_____
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<b>Signature</b>	<p>I certify, under penalty of law, that the company named on page 1 of this application will utilize only <u>trained</u> and <u>PA certified</u> employees to perform Asbestos abatement work in the Commonwealth of Pennsylvania.</p> <p>Owner or Corporate Officer Name (Printed or Typed): _____</p> <p>Owner or Corporate Officer Name (Signed): _____</p> <p>Date Signed: _____</p>																						
<b>Filing Requirements</b>	<p><b>FEE SCHEDULE:</b> For an up-to-date listing of fees, please see the Fee Schedule listed on our website (<a href="http://www.dli.pa.gov/Individuals/Labor-Management-Relations/bois">www.dli.pa.gov/Individuals/Labor-Management-Relations/bois</a>) or contact our office for a copy of the Fee Schedule by email <a href="mailto:CALBOIS@pa.gov">CALBOIS@pa.gov</a>, by telephone at 717-772-3396 or by fax at 717-705-0196.</p> <p>Make all checks and money orders payable to <b>Commonwealth of Pennsylvania</b>. Mail this 2-page application, payment and any additional documentation to:</p> <p><b>PA Department of Labor &amp; Industry Certification, Accreditation and Licensing Division 651 Boas Street, Room 1606 Harrisburg, PA 17121</b></p> <p>Please direct any questions regarding certification to 717-772-3396 or <a href="mailto:CALBOIS@pa.gov">CALBOIS@pa.gov</a>.</p>																						