LEAD ARKANSAS DEPARTMENT OF HEALTH (ADH) APPLICATION FOR ANNUAL LEAD-BASED PAINT CERTIFICATION

ADH - Environmental Epidemiology Mail or Deliver to: FOR DEPARTMENT USE ONLY **Lead-Based Paint Program** Date Received 4815 West Markham St., Slot 32 Received by Little Rock, AR 72205-3867 **Process Date** 501-661-2893 ☐ Initial Today's Date: Application Reciprocity Renewal Application If renewal, provide current Arkansas Certification Number: Name: Email Address: Social Security Number: Home Phone Number: Home Address: City: _____ State: Zip: _____ Date of Birth: Place of Birth: Are you employable in the U.S.? ☐ Yes □ No APPLICANT REQUESTS CERTIFICATION OR RENEWAL FOR THE FOLLOWING CERTIFICATE: Project Designer Inspector Risk Assessor Supervisor Worker *Present Phone Number: Employer: City: State: Zip: Employer Address: Training Provider who conducted your training: Are you a veteran?: Yes No Training Provider City: State: Zip: Address: This is to affirm that the above information is accurate and has been provided by me: Applicant's Signature: Date: NOTE: The appropriate certification fee, disclosure form and original certificate(s) of training must be submitted with the application. The certification fees are: Inspector, Risk Assessor, Supervisor, and Project Designer certification: \$150 for each discipline. Worker certification: \$35. Replacement ADH licenses or certificates: \$15. * In accordance with Ark. Code Ann. 20-27-2401-2409, any person desiring a certification as an inspector, risk assessor, supervisor or project designer to participate in lead abatement activities must do so under the direction of a licensed contractor, consultant, or as an in-house employee. Verification of current employer will be made prior to certification/recertification in compliance with Ark. Code Ann. 20-27-2401-2409. PLEASE STATE WHERE TO MAIL CERTIFICATION: **☐** HOME **☐** BUSINESS

Aug 2022