

# NORTH CAROLINA RENOVATION FIRM CERTIFICATION APPLICATION

“PLEASE TYPE OR PRINT IN INK”

## PART I. APPLICANT INFORMATION

Select the appropriate certification type:  Initial  Renewal  Amendment  
(See Instructions for clarification of certification types)

NAME OF FIRM \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

(if different from street address)

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE \_\_\_\_\_ FAX NUMBER \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

IF RENEWAL OR AMENDMENT, LIST NC CERTIFICATION NUMBER (e.g., RRP1642) \_\_\_\_\_

## PART II. OATH

I hereby attest that, in accordance with N.C.G.S. §130A-453.24 and 10A NCAC 41C .0903, Certification of Renovation Firms, this firm shall employ appropriately certified individuals to conduct lead-based paint renovation activities, and its employees shall follow the work practice standards in accordance with N.C.G.S. §130A, Article 19B and 10A NCAC 41C .0900, and all applicable local, State, and Federal requirements. This includes all applicable record-keeping, record retention, information distribution, and reporting requirements. I hereby attest and affirm that the information included on this application, including any attachments, is true and accurate to the best of my belief and knowledge. I acknowledge that any certification issued pursuant to this application, including any attachments, will be subject to revocation if issuance was based on incorrect or inadequate information that materially affected the decision to issue the certification. **I attest that a full disclosure of any action by EPA or any EPA-authorized program involving violations, suspensions, revocations, or modifications of this firm's lead-based paint activities is attached.**

\_\_\_\_\_  
FIRM OFFICIAL'S ORIGINAL SIGNATURE

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
DATE

## PART III. REQUIRED SUPPORTING DOCUMENTATION

A. ARE CERTIFIED RENOVATORS AND/OR DUST SAMPLING TECHNICIANS  YES  NO  
CURRENTLY EMPLOYED WITH THIS FIRM?  
**IF YES, ATTACH LIST OF NC-CERTIFIED PERSONNEL AND THEIR NC PROGRAM CERTIFICATION NUMBERS.**

B. IS THE \$300 CERTIFICATION FEE ENCLOSED?  YES  NO  
(THE FEE IS REQUIRED FOR INITIAL AND RENEWAL APPLICATIONS)  
**DO NOT SEND CASH.**  CHECK  MONEY ORDER  
**Make check or money order payable to: NC DHHS – HEALTH HAZARDS CONTROL UNIT**

C. DOES THE FIRM HAVE ANY PAST, PRESENT, OR PENDING LEAD-BASED PAINT  
ACTIVITY VIOLATIONS OF EPA, STATE, U.S. TERRITORY, OR INDIAN TRIBAL  
LAND(S) REGULATIONS?  YES  NO  
**IF YES, ATTACH A FULL DISCLOSURE OF ANY SUCH VIOLATIONS.**

**\*\*DO NOT WRITE BELOW THIS LINE – FOR DEPARTMENT USE ONLY\*\***

CERTIFICATION NUMBER \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

CHECK/M.O. NUMBER \_\_\_\_\_ AMOUNT PAID \_\_\_\_\_

APPROVING SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

## **INSTRUCTIONS**

### **FOR COMPLETION OF RENOVATION FIRM CERTIFICATION APPLICATION**

#### **PURPOSE**

A Renovation Firm Certification Application shall be submitted in order to request a North Carolina certificate of approval for a firm conducting lead-based paint renovation activities per N.C.G.S. §130A-453.24 and 10A NCAC 41C .0903, Lead-Based Paint Hazard Management Program for Renovation, Repair, and Painting Rules.

An amended application is required to be submitted to the Program within 90 days of any change to Part I (Applicant Information) and/or C only of Part III (Required Supporting Documentation, Full Disclosure of Violations) of the application. There is no fee for submitting amended information.

#### **PREPARATION**

All information is to be filled out completely, typed or printed clearly in ink. Pencil is not acceptable.

#### **INSTRUCTIONS**

##### **PART I. APPLICANT INFORMATION**

Please indicate the type of certification requested. Firms applying for certification for the first time will check “Initial”. Check “Renewal” on subsequent applications submitted in order to maintain renovation firm certification. Initial and renewal firm certifications expire on the last day of the twelfth month after certification is issued. Therefore, renewal will be required annually in order to maintain firm certification.

Firms needing to amend/revise/update information in Part I and/or C only of Part III, will check “Amendment”. There is no fee for submitting amended information.

Enter the firm’s full name, street address, city, state and zip code as it should appear on the certificate of approval. Please add the mailing address if it is different than the street address.

Enter the firm’s telephone and fax numbers complete with area codes. Enter an email address for either the firm or the firm’s official, if applicable.

If applying for renewal certification or submitting amended information, enter the North Carolina Firm Certification Number (e.g., RRP1642). **Do not** enter the training certificate number from a Renovator training certificate (e.g., R-R-18376-14-00001) in this block.

##### **PART II. OATH**

The firm’s official should read the OATH carefully. If a firm does not use renovators and/or dust sampling technicians certified by the Program to perform lead-based paint renovation activities or does not conduct lead-based paint renovation activities in accordance with all applicable local, State, and Federal regulations, the Program may revoke the firm’s certification. If any misinformation is found to exist in the application, the firm’s certification may be subject to revocation.

The application shall be signed and dated by the firm’s official representative. Applications without signatures will be rejected. The name of the signatory must be **clearly** printed under the signature.

Please refer to N.C.G.S. §130A-453.24 and 10A NCAC 41C .0903 for additional information regarding the certification of renovation firms.

### **PART III. REQUIRED SUPPORTING DOCUMENTATION**

**A.** If the firm currently employs North Carolina certified renovators and/or dust sampling technicians, check “Yes” and **attach a listing of the certified individuals’ names and their North Carolina Program certification numbers** to the application. These numbers are provided on the letters from the Health Hazards Control Unit awarding renovator or dust sampling technician certification. They can be found in the box on the upper right portion of the letter. An example certification number for a NC-certified renovator would be a six-digit number beginning with a “17” (e.g., 170448). An example certification number for a NC-certified dust sampling technician would be a six-digit number beginning with a “16” (e.g., 160145).

If the firm does not currently employ certified personnel, check “No”.

Please be advised that North Carolina Renovator Certification is awarded only after successful completion of an accredited Renovator course **and** submittal of a completed North Carolina Lead Renovator Certification Application.

**B.** If the firm is applying for initial or renewal firm certification, enclose the firm certification fee of \$300.00. The fee is required for initial and renewal applications. Make check or money order payable to: NC DHHS – HEALTH HAZARDS CONTROL UNIT. **DO NOT SEND CASH.** There is no fee when submitting an application for the sole purpose of amending previously submitted information.

**C.** **Attach a fully documented disclosure of any action by EPA, State, US territory, or Indian tribal land(s) involving past, present, or pending lead-based paint activity violations, suspensions, revocations, or any modifications of a firm’s activities.** If the firm has had no such actions taken against it, check “No” on the application.

#### **For Additional Forms and Information**

Please contact the Health Hazards Control Unit at 919-707-5950, email: [general.hhcu@dhhs.nc.gov](mailto:general.hhcu@dhhs.nc.gov) **OR** go to our website at: <https://www.dph.ncdhhs.gov/programs/environmental-health/health-hazards-control-unit/lead>

**The completed application form with supporting documentation should be mailed to:**

**For All USPS, UPS, and FedEx Mail Deliveries:**

**Health Hazards Control Unit  
NCDHHS – Division of Public Health  
1912 Mail Service Center  
Raleigh, NC 27699-1912**

**For All FedEx and UPS Expedited Deliveries  
(No USPS. Only FedEx, UPS, etc.):**

**Health Hazards Control Unit  
NC DHHS – Division of Public Health  
65 Moore Drive  
Durham, NC 27713**