

NORTH CAROLINA APPLICATION FOR LEAD ABATEMENT ACTIVITY - FIRM CERTIFICATION

****PLEASE TYPE OR PRINT IN INK / NOT FOR RENOVATION, REPAIR AND PAINTING USE****

NAME OF FIRM _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

MAILING ADDRESS _____

(if different from above)

CITY _____ STATE _____ ZIP CODE _____

TELEPHONE _____ FAX NUMBER _____

EMAIL ADDRESS _____

IF RENEWAL, LIST CERTIFICATION NUMBER (e.g., FPB396) _____

OATH:

I hereby attest that, in accordance with 10A NCAC 41C .0803, Certification of Firms, this firm shall use only certified individuals to perform lead-based paint activities. I attest that this firm will perform lead-based paint activities in accordance with 10A NCAC 41C .0801 - .0809, and all applicable local, State, and Federal requirements, including all applicable record-keeping requirements. I attest that a full disclosure of any action by EPA or any EPA-authorized program involving violations, suspensions, revocations, or modifications of a firm's activities are attached.

FIRM REPRESENTATIVE'S ORIGINAL SIGNATURE

ENCLOSE \$50 FEE.

PRINTED NAME

CHECK

TITLE

MONEY
ORDER

DATE

****DO NOT WRITE BELOW THIS LINE -FOR DEPARTMENT USE ONLY****

CERTIFICATION NUMBER _____ EXPIRATION DATE _____

CHECK/M.O. NUMBER _____ AMOUNT PAID _____

APPROVING SIGNATURE _____ DATE _____

INSTRUCTIONS

APPLICATION FOR LEAD ABATEMENT ACTIVITY FIRM CERTIFICATION

PURPOSE

An Application for Lead Abatement Activity Firm Certification shall be submitted in order to receive a North Carolina certificate of approval for a firm conducting lead-based paint activities (i.e., Inspection, Risk Assessment, Project Design and Abatement) per 10A NCAC 41C .0800, Lead-Based Paint Hazard Management Program Rules.

This form ***is not*** to be used for Renovation, Repair and Painting (RRP) Firm Certification, use the form titled “North Carolina Renovation Firm Certification Application” for RRP Firm Certification.

PREPARATION

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

INSTRUCTIONS

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 code.

Indicate certification number if applying for renewal certification (e.g., FPB396)

The firm’s representative should read the OATH carefully. If a firm does not use certified individuals to perform lead-based paint activities or does not conduct lead-based paint 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. **A full disclosure of any action by EPA or any EPA-authorized program involving violations, suspensions, revocations, or modifications of a firm’s activities must be attached.**

The application shall be signed and dated by the firm’s representative. Applications without signatures will not be reviewed.

Please refer to 10A NCAC 41C .0803 for additional information regarding the certification of firms.

REQUIRED SUPPORTING DOCUMENTATION

Enclose a check or money order for \$50.00. Make check or money order payable to: NC DHHS - HEALTH HAZARDS CONTROL UNIT. **PLEASE DO NOT SEND CASH.**

For Additional Forms and Information

Please contact the Health Hazards Control Unit at 919-707-5950 **OR** go to our website at:

<http://epi.publichealth.nc.gov/asbestos/ahmp.html>

FOR US POSTAL SERVICE

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

FOR EXPRESS DELIVERY SERVICES OTHER THAN US MAIL:

Health Hazards Control Unit
NC DHHS – Division of Public Health
5505 Six Forks Road, 2nd Floor, Room D-1
Raleigh, NC 27609