

## Application Form For Group License Asbestos Section



1. Company Name:		4. Group License Number:						
2. Mailing Address:	Mailing Address:			5. Company Official:				
			6. Title:					
(City) 3. Street Address:	(State)	(Zipcode)	7. Telephone #	:				
			8. In-house Co	ntractor:				
(City)	(State)	(Zipcode)	(m)		Ir D			
Name	SS Number	Discipline	(P)ass (F)ail	Training Provider/Instructor	Exam Date (MM/DD/YYYY)			

## **Disciplines Under Group License**

Class IV Worker Disturbing RACM
Roofer Worker
AHERA Worker
Air Sampler
Building Inspector

O & M Worker
Roofer Supervisor
AHERA Supervisor
AHERA Supervisor
Project Designer
Mgmt. Planner

10. Total Fee Due:

## **Fee Schedule For Group License**

 up to 10 people
 \$ 25.00 minimum fee

 11th to 20th person
 \$ 2.50 per person

 21st to 50th person
 \$ 5.00 per person

 51st to 90th person
 \$ 7.50 per person

 91st or more persons
 \$500.00 maximum fee

Name	SS Number	Discipline (Pass/Fail)	Training Provider/Instructor	Exam Date

11. Signature: