



Air Pollution Control Division Application for Individual Asbestos Certification

WHO MUST APPLY: Certification is required under Colorado law (§§25-7-506 and 507, C.R.S. 1982, as amended) for all persons performing asbestos activities in the state of Colorado. Certification must be renewed annually.

FEES: Please make checks or money orders payable to: CDPHE. Visa, MasterCard & Discover accepted in person only. We cannot accept cash.

REQUIRED DOCUMENTS:

- Government issued picture ID.
- **Original** of any training certificate(s) earned since the date of your latest Colorado certificate.

FIRST TIME APPLICANTS: attach the original of **ALL** training (initial and refresher) certificates, First time AMS applicants must provide a copy of their high school/college diploma/transcript or GED and completed original on-the-job experience form.

First Name:	Last name:		
Address:	City:	State:	Zip:
Company Name/ Address (optional):	City:	State:	Zip:
Personal Phone:	Personal Email Address:		
<input type="checkbox"/> Please hold my certification documents for pick up.* <input type="checkbox"/> Please mail my certification documents.	I acknowledge that I must be employed by a GAC or ACF: <input type="checkbox"/>		

Application Type:

- New Applicant/First time applicant to Colorado
- New Certification type; I am currently certified in another discipline: Colorado Cert. # _____
- Re-certification : Colorado Cert. # _____

<input type="checkbox"/> \$125.00 [code 411]	Worker	Non-Pass re-test	<input type="checkbox"/> \$125.00 [code 412]
<input type="checkbox"/> \$250.00 [code 421]	Supervisor	Non-Pass re-test	<input type="checkbox"/> \$125.00 [code 422]
<input type="checkbox"/> \$250.00 [code 431]	Project Designer	Non-Pass re-test	<input type="checkbox"/> \$125.00 [code 432]
<input type="checkbox"/> \$175.00 [code 441]	Building Inspector	Non-Pass re-test	<input type="checkbox"/> \$125.00 [code 442]
<input type="checkbox"/> \$175.00 [code 441]	Management Planner	Non-Pass re-test	<input type="checkbox"/> \$125.00 [code 442]
<input type="checkbox"/> \$250.00 [code 461]	Air Monitoring Specialist	Non-Pass re-test	<input type="checkbox"/> \$125.00 [code 462]
<input type="checkbox"/> \$275.00 [code 471]	Supervisor/Project Designer	Non-Pass re-test	<input type="checkbox"/> \$125.00 [code 47xxx (2,3,8)]
<input type="checkbox"/> \$275.00 [code 481]	Building Inspector/ Management	Non-Pass re-test	<input type="checkbox"/> \$125.00 [code 48xxx (2,3)]
<input type="checkbox"/> \$25.00 [code 499]	ID/Certificate Replacement		

I certify that all statements made in this application are correct and complete. I understand that providing false statements or providing fraudulent identification constitutes second degree perjury as defined by §18-8-503, C.R.S and is punishable by law.

Signature: _____ **Date:** _____

***IDs may only be picked up in person. A valid photo ID will be required.**

The applications, fee and required documentation may be mailed or hand-delivered to:

<u>Mail to:</u>	<u>Walk-Ins:</u>
Colorado Department of Public Health and Environment Certification Coordinator APCD-IE-B1 4300 Cherry Creek Drive South Denver, CO 80246-1530	Colorado Department of Public Health and Environment 700 South Ash Street Denver, CO Southwest Door, the sign over door says "Asbestos Unit and Air Permits"

FOR APCD USE ONLY

Accounting: Tracking # _____ CC/Check# _____ Amount: _____

Postmark Date: _____ Approved By: _____ Identification Verified

____ Evidence of training

____ Initial training date: _____ (First time applications only)

____ Expiration date of last refresher: _____

____ Training meets Colorado requirements.

AMS Only

____ Meets education requirements. ____ Meets work experience requirements.

Date test taken _____ Score _____

Date test taken _____ Score _____

Date test taken _____ Score _____

____ Passing score _____

Approved for certification & mailed/held: Date: _____ By: _____