



\_\_\_10. Read and sign the following statement:

Under penalties of law, I declare that to the best of my knowledge and belief, the above is true, correct, and complete.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_

ATTACH WITH APPLICATION:

Provide proof of training certification for a thirty-two (32) hour Asbestos Worker Training Course and/or refresher certifications issued by an approved training provider of Region III.

A statement from a doctor that the Asbestos Worker had continued medical surveillance in accordance with OSHA 1910.1001 and is medically approved for respirator use (Complete Physical, Pulmonary Function and a NIOSH "B" Reader Chest X-Ray).

Required application fee of \$25.00 (cash, money order, or company check only). No credit cards accepted.

**All licensees must present a valid Government Issued Photo Identification when applying.**

**NOTE: Under Reciprocity, all applicants must submit all training certificates (initial training and each year thereafter) for review by the Asbestos Office prior to the processing of the Delaware certification. Approved training providers must be EPA approved, Region III state approved and the course must be taught within a Region III state's boundaries.**