

Lead-Based Paint Project Supervisor Renewal Application Form

Please remit renewal application form and applicable fees by **due date** to the following address:

EPD - Lead Fees
P. O. Box 101896
Atlanta, Georgia 30392



1. Type of Renewal

DISCIPLINE	CERTIFICATION NUMBER	RENEWAL FEE
Lead Supervisor		\$150.00

2. Applicant Information

Please complete the below section indicating current application status.

Last Name		First Name	MI
Applicant Street Address			
City	State	Zip	
Phone Number ()		Fax Number ()	
Social Security Number		Height	Weight
E-mail	DOB	Sex	

3. Company Information

Company Name			
Company Address			
City	State	Zip Code	
Phone Number ()		Fax Number ()	
Primary Contact Person		Owner/ President of Company	

4. Applicant Verification of Information

Falsifying or knowing omission of any material required as part of this application is grounds for application refusal and/or license suspension or revocation. I understand that as a certified individual, I am required to work for a certified firm when conducting lead-based paint activities. I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attached documents, and that the submitted information is true, accurate and complete.

Applicant Signature

Date

For Program Use Only			
Received By:	Date Received:	Check Number:	Check Amount:
Deposit Date:	Deposit Number:		