Nevada Department of Business and Industry Division of Industrial Relations Occupational Safety and Health Administration

#### **Southern District Office**

2300 W. Sahara Avenue, Suite 500 Las Vegas, NV 89102 Phone: (702) 486-9020 Fax: (702) 990-0360

## Northern District Office

4600 Kietzke Lane Building F, Suite 153 Reno, NV 89502 Phone: (775) 688-3700 Fax: (775) 688-1378

DO NOT WRITE IN THIS SPACE
FOR SECTION USE ONLY:

License No: \_\_\_\_\_

Expiration Date:

#### APPLICATION FOR ASBESTOS ABATEMENT CONTRACTOR LICENSE

#### PLEASE PRINT OR TYPE

1.	Name of Applicant:
	Date of Birth: Social Security No:
2.	Name of Business:
	Street/Ste. or PO Box:
	City: State: Zip:
	Telephone Number: Fax No:
3.	Federal Employer Identification No (FEIN):
4.	Nevada Contractor's License: INCLUDE a copy of current license with this application.
5.	Proof of Industrial Insurance: INCLUDE a copy of your current Worker's Compensation Policy with this application.
6.	Evidence of Experience: Letter from current Employer on Company Letterhead detailing evidence of 2 years of experience in projects for the abatement of asbestos must be <u>INCLUDED</u> with this application.
	Is this application for <u>"Limited Contractor"</u> license? Yes $\Box$ No $\Box$
7.	<b>Proof of Training:</b> <u>INCLUDE</u> a copy of certification of successful completion of a <b>5-day, EPA approved Initial</b> <b>Training Course for Asbestos Abatement Contractors</b> <u>AND</u> a copy of certification of <u>current</u> Refresher Training if the Initial Training was more than 10 months before the date of this application.
8.	Identification: Applicant, INCLUDE a copy of your current driver's license or passport.
9.	<b>License Fees:</b> <u>INCLUDE</u> a license fee of <u>\$200.00</u> , by check or money order made payable to <u>DIVISION OF</u> <u>INDUSTRIAL RELATIONS.</u>
10.	Read and sign the following statement:
	, and it where all of the information provided in this application is somewhere and two to the base of multiplication .

I hereby certify that all of the information provided in this application is complete and true to the best of my knowledge. I further certify that I will comply with all requirements applicable under the Nevada Asbestos Abatement Control Act and Department Regulations.

### ATTACHMENT TO OSHA FORM ACP-1b (Application for Asbestos Abatement Contractor License)

# PLEASE READ THE FOLLOWING SUMMARY OF REQUIREMENTS AND <u>RETAIN THIS COPY</u> FOR YOUR INFORMATION:

In order to maintain a license, an Asbestos Abatement Contractor shall:

- 1. <u>Apply</u> to the Division in accordance with the regulations.
- 2. Submit in writing to the Division a notification of any proposed Asbestos Abatement Project in the state.
- 3. Ensure that records of all Asbestos Abatement Projects which it performs are maintained and retained for 30 years.
- 4. Ensure that an Asbestos Abatement Supervisor who has been properly trained and licensed in accordance with the regulations remains present on-site whenever any asbestos abatement activity is being carried out as part of an Asbestos Abatement Project.
- 5. Ensure that all Asbestos Abatement Workers and Supervisors in its employ have been properly trained and licensed.
- 6. Implement a Respiratory Protection Program and <u>submit</u> a written copy of the Respiratory Protection Program to the Division when applying for a license.
- 7. Provide each of its employees who engage in asbestos abatement activities the necessary protective gear and clothing, and <u>submit</u> a written description of the protective gear and clothing that must be issued to all potentially exposed employees to the Division when applying for a license.
- 8. Provide or make available to all employees who engage in asbestos abatement activities a written Medical Monitoring Program, which must be <u>submitted</u> to the Division when applying for a license.
- 9. Implement a written Air Monitoring Program for Asbestos Abatement Projects to cover employees who may be exposed to airborne asbestos fibers, which must be <u>submitted</u> to the Division when applying for a license.
- 10. Ensure that all asbestos abatement activities performed by the Asbestos Abatement Contactor and its employees and agents are carried out in accordance with the requirements of 29 CFR 1926.1101 of the Construction Industry Standard for Asbestos Abatement of the standards of the Division.
- 11. Ensure that all asbestos abatement activities performed by the Asbestos Abatement Contractor and its employees and agents are carried out in accordance with the provisions of Nevada Administrative Code 618. Submit copy of your Nevada Contractor's License with application.
- 12. Provide the employees if the Division with the use of a Supplied Air System for on-site inspections, if a Supplied Air System is being used for asbestos abatement activities at the project location.
- 13. <u>Submit</u> a list of asbestos abatement equipment available for use at an Asbestos Abatement Project in the State when applying for a license.
- Note: Items 6, 7, 8, 9, 11 and 13 must be <u>SUBMITTED</u> with the Application for Contractor License.

#### MANDATORY REQUIREMENT FOR LICENSING

Federal Welfare Reform as implemented by the 1997 Session of the Legislature by SB 356 requires that professional and occupational licensing agencies add certain questions regarding child support to all applications for new licenses and for renewals. Please answer the following questions in order for your application to be processed.

#### **CHILD SUPPORT INFORMATION**

Please mark appropriate response (failure to mark <u>one</u> of the three options will result in denial of the application).

 $\Box$  I am <u>**not**</u> subject to a court order for the support of a child.

 $\Box$  I am subject to a court order for the support of one or more children and am in compliance with the order or am in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant the order; **or** 

□ I am subject to a court order for the support of one or more children and am **not** in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for repayment of the amount owed pursuant to the order.

Applicant's Social Security Number:

Signature of Applicant

Date

## REPORT OF EXISTENCE OF NEVADA BUSINESS LICENCE Pursuant to NRS 335C.1965 All applicants <u>MUST</u> complete this section. Please select <u>ONE</u> option.

I have a Nevada Business License number assigned by the Nevada Secretary of State upon compliance
with the provisions of NRS Chapter 76.

My Nevada Business License number is: \_\_\_\_\_

□ I have applied for a Nevada Business License with the Nevada Secretary of State upon compliance with the provision pf NRS Chapter 76 and my application is pending.

I do **not** have a Nevada Business License number.

The Nevada Occupational Safety and Health Administration is not the arbiter of determining whether the applicant needs a business license. Information about the Nevada Business License can be found on the Secretary of State's website at http:// nvsos.gov/.