FUND CODE: 71600-70579-2190

Application For Lead-Based Paint Certification – Individual Renewal

Oregon Department of Human Services
Lead-Based Paint Program
800 NE Oregon Street, Suite 608
Portland, OR 97232-2187

For Department Use Only

Cert. #_____

Type of Certification

☐ Risk Assessor **(2901)** ☐ Supervisor **(2903)** ☐ Project Designer **(2905)**
☐ Inspector **(2902)** ☐ Worker **(2904)**

Non Refundable Fees

Worker = $50, all other disciplines = $85 Make check payable to Oregon DHS.

Name:_____
(Please Print Clearly) **Last** **First** **M.I.**

Social Security Number (REQUIRED BY LAW): ___ ___ ___ / ___ ___ / ___ ___ ___ ___

Residence Mailing Address:_____
Number **Street** **Apt. #**

_____
City **State** **Zip Code**

( ) ( )
Home Telephone # **Home Fax #**

_____
Email Address **Website**

Business or Firm Name:_____

Firm Mailing Address:_____
Number **Street** **Suite #**

_____
City **State** **Zip Code**

( ) ( ) ( )
Firm Telephone # **Mobile/Cellular #** **Firm FAX #**

Application Checklist

☐ Application Signed ☐ Documentation of Experience
☐ Documentation of Education ☐ Non Refundable Application Fee(s)
☐ Documentation of Lead-Based Paint Training ☐ Two Passport Photos

I certify that I have read and shall comply with ORS 431.920, ORS 701.500 to 701.515, the rules adopted pursuant thereto and that the information and documentation given in this application is complete and accurate to the best of my knowledge.

Signature _____ Date Signed: _____