

**Oregon Health Authority  
Lead-Based Paint Program**

**Instructions for Completing the *Application for Individual–Initial Certification, Lead-Based Paint Activities (Abatement and Inspection) Form***

**Certification Eligibility**

The Oregon Health Authority (Authority) issues lead-based paint activities three-year certifications to individuals in the following disciplines: abatement worker, abatement supervisor, inspector, risk assessor, and project designer. Review the document entitled ***Eligibility Requirements for Lead-Based Paint Abatement and Inspection Professionals***. You must meet all training, education and experience requirements listed on the form for each discipline for which you apply. Do not rely on your training provider to determine your eligibility for certification.

**Steps for Completing the Application**

**Step # 1:** All applicants must complete and sign the form: ***Application for Individual-Initial Certification, Lead-Based Paint Activities***. Check boxes for all lead-based paint activity disciplines for which you are applying.

**Step #2:** Applicants for abatement supervisor, project designer, or risk assessor must also complete and have signed the ***Proof of Experience Form***. Complete a separate page for each job you wish to use for qualifying experience. Proof of experience may include resumes, letters of reference, or documentation of work experience, as evidence of meeting the work experience requirements. **The experience documentation is not required for abatement worker or inspector applicants.**

**Step #3:** Applicants for abatement supervisor, inspector, and risk assessor must complete the ***Certification Examination Form*** and pass a qualifying exam administered by the Authority. The exam is not required for abatement worker or project designer applicants.

**Step #4:** All applicants must submit copies of:

- Lead-based paint training course certificate(s) from an accredited training provider;
- High school or college diploma or transcript (for risk assessor and project designer only).

**Step #5:** All applicants must include a digital passport-type photo. The face must be clearly visible with a plain background.

**Step #6:** All applicants must pay the application fee(s) online. Application fees are \$150 for abatement worker and \$255 for all other disciplines. The payment link is in the upper left box on the application.

**Step #7:** Send completed application materials via [this secure email form](#). Enter “leadprogram@odhsoha.oregon.gov” into the form (for secure email form tech. assist.: 503-945-5623). Or FAX application materials to 971-673-0457.

**Step #8:** Visit CCB’s [website](#) to determine your CCB licensing requirements or call 503-378-4621.

If you need assistance with your application, call the Lead-Based Paint Program at (971) 673-0440.



Oregon Health Authority  
Lead-Based Paint Program  
**Eligibility Requirements for  
Lead-based Paint Abatement and  
Inspection Professionals**

**Inspector Requirements:**

- Training:** Successfully complete and receive a course completion certificate from an accredited lead-based paint inspector training course.
- Experience/Education:** None
- Examination:** Pass the certification examination administered by the Authority for inspector.

**Risk Assessor Requirements:**

- Training:** Successfully complete and receive a course completion certificate from an accredited lead-based paint inspector and lead-based paint risk assessor training course.
- Education/Experience:** A bachelor's degree **and** one year of experience in a related field (e.g. lead, asbestos, environmental remediation work, or construction); **or**  
An associate degree **and** two years of experience in a related field (e.g., lead, asbestos, environmental remediation work, or construction); **or**  
Certification as an industrial hygienist, professional engineer, registered architect, and/or certification in a related engineering/health/environmental field (e.g., safety professional, environmental scientist); **or**  
A high school diploma (or equivalent), **and** at least 3 years of experience in a related field (e.g., lead, asbestos, environmental remediation work, or construction).
- Examination:** Pass the certification exam administered by the Authority for risk assessor.

**Abatement Worker Requirements:**

- Training:** Successfully complete and receive a course completion certificate from an accredited lead-based paint worker training course.
- Experience/Education:** None
- Examination:** None

## **Supervisor Requirements:**

<b>Training:</b>	Successfully complete and receive a course completion certificate from an accredited lead-based paint abatement supervisor training course.
<b>Experience:</b>	One year of experience as a certified lead-based paint abatement worker; <i>or</i>  At least two years of experience in a related field (e.g., lead, asbestos, or environmental remediation work) or in the building trades.
<b>Education:</b>	None
<b>Examination:</b>	Pass the certification exam administered by the Authority for supervisor.

## **Project Designer Requirements:**

<b>Training:</b>	Successfully complete and receive a course completion certificate from an accredited lead-based paint abatement supervisor and project designer training course.
<b>Education/Experience:</b>	Bachelor's degree in engineering, architecture, or a related profession, and one year of experience in building construction and design or a related field; <i>or</i>  Four years of experience in building construction and design or a related field.
<b>Examination:</b>	None

## **Documentation of Education and Experience:**

The following documents shall be recognized by the OHA as evidence of meeting the training, education and experience requirements:

- Copy of course completion certificates issued by an accredited training program.
- Official academic transcripts or diploma, as evidence of meeting the education requirements.
- Resumes, letters of reference, or documentation of work experience, as evidence of meeting the work experience requirements.

If you have any questions or need assistance with the eligibility requirements for a lead-based paint professional, call the Oregon Lead-Based Paint Program at 971-673-0440.

## Application for Individual–Initial Certification Lead-Based Paint Activities

Program Code #: LBPAC  
Order ID # \_\_\_\_\_

[Pay with Credit Card](#)

Oregon Health Authority  
Lead-Based Paint Program

Send via this [secure email form](#)

Enter “leadprogram@odhsoha.oregon.gov” into the  
form or FAX the application materials to 971-673-0457

**Program Use Only**

Cert. # \_\_\_\_\_

### Type of Certification

- |  |                                     |   |
|--|-------------------------------------|---|
| <input type="checkbox"/> Risk Assessor | <input type="checkbox"/> Supervisor | <input type="checkbox"/> Project Designer |
| <input type="checkbox"/> Inspector     | <input type="checkbox"/> Worker     |   |

### Non-Refundable Fees (Three-year certification)

Worker = \$150, other disciplines = \$255 per discipline Pay online via the link in the upper left box.

**Name:** \_\_\_\_\_  
(As it appears on Social Security card) Last First M.I.

**Social Security Number (REQUIRED BY LAW):** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Residence Mailing Address:** \_\_\_\_\_  
Number Street Apt. #

City State Zip Code

Home/Cell Phone # \_\_\_\_\_

### **Business or Firm Name:**

(Legal, active name registered with the Oregon Secretary of State - Corporation Division, unless otherwise exempt from their regulations. Examples include legal names registered as sole proprietor, general partnership, LLC, business corporation, non-profit corporation, etc.)

**Firm Mailing Address:** \_\_\_\_\_  
Number Street Suite #

City State Zip Code Individual's Work Cell Phone #

Firm Phone # FAX # Individual's Work Email (or personal if no work email address)

### **Application Checklist**

- |  |  |
|--|--|
| <input type="checkbox"/> Application Signed  | <input type="checkbox"/> Documentation of Experience (not required for Worker/Inspector) |
| <input type="checkbox"/> Documentation of Education (not required for Worker/Supervisor/Inspector) | <input type="checkbox"/> Non Refundable Application Fee(s)                               |
| <input type="checkbox"/> Documentation of Lead-Based Paint Training                                | <input type="checkbox"/> Digital or Scanned Passport Photo                               |
- (Copy of a current course completion certificate(s))
- ☐ Check this box if you DO NOT want your name posted on our website as a lead abatement professional.

*I certify that I have read and shall comply with ORS 431A.355 and OAR 333-069; and I understand that failure to comply with those requirements may result in monetary penalties and/or revocation of my certification. I also certify that the information and documentation given in this application is complete and accurate to the best of my knowledge.*

Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

**Proof of Experience Form  
Individual Lead-Based Paint Certification**

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Complete a separate form for each job you wish to use for qualifying experience. Copy this form if you need additional copies.

**Applicant Information**

Name: \_\_\_\_\_

Oregon CCB Number (if applicable): \_\_\_\_\_

**Employer Information**

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Supervisor's Phone Number: \_\_\_\_\_

Supervisor's E-Mail Address: \_\_\_\_\_

**Experience Information**

Describe the applicable experience the applicant gained while working for this employer. Use additional pages if necessary.

Dates applicant was employed to do the work described above: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
m d y m d y

Percentage of time applicant did the work described above: \_\_\_\_\_ %

**Declaration and Signature of Employer**

I certify that the information contained in this document is complete and accurate to the best of my knowledge.

\_\_\_\_\_  
Employer/Supervisor Signature

\_\_\_\_\_  
Print name of Employer/Supervisor

\_\_\_\_\_  
Title of Employer/Supervisor

\_\_\_\_\_  
Date Signed

## **Social Security Numbers Required on Certification Applications**

As part of your application for an initial or renewed occupational or professional license, or registration issued by the State of Oregon, you are required to provide your Social Security Number to the State of Oregon. This is mandatory. The authority for this requirement is Oregon Laws 1997, Chapter 746, Section 117 (ORS 25.785) and 42 USC § 666 (a) (13). Failure to provide your Social Security Number will be a basis to refuse to issue or renew the license, certification, or registration you seek. Although a number other than your Social Security Number appears on the face of the certificate issued by the State of Oregon, your Social Security Number will remain on file with the State of Oregon. This record of your Social Security Number will be used for child support enforcement purposes only, unless you authorize other uses of the number.