

# Georgia Department of Natural Resources

Environmental Protection Division  
Land Protection Branch  
Lead-Based Paint & Asbestos Program  
4244 International Parkway, Suite 104, Atlanta, Georgia 30354  
Noel Holcomb, Commissioner  
Carol A. Couch, Ph.D., Director  
404/363-7026

May 12, 2006

## MEMORANDUM

TO: Asbestos Contractor License Applicants

FROM: Robert M. Gwin, Program Manager I

SUBJECT: Submittal Of Applications For Asbestos Contractors Licenses

### EXTREMELY IMPORTANT UPDATE!

Effective immediately, EPD's Asbestos Program is making changes to how Asbestos Contractor application fees and documents are received.

As of May 31, 2006, application fee payments must be mailed to the address given below. No direct-mailed or hand-delivered application fee payments will be accepted at the Tradeport offices. **ALL** fee payments – both lead and asbestos – must be directed through the appropriate post office lock box. To submit applications for,

- Asbestos Contractor License
- Asbestos Contractor Renewal
- Principal Agent Change
- Asbestos Contractor Company Name Change

send your **application fee payments** (checks and/or money orders only) made payable to EPD-Asbestos Fees and attached to the payment voucher included in each application package to the asbestos fee lockbox at the following address:

**EPD Asbestos Fees Lockbox  
Post Office Box 101173  
Atlanta, Georgia 30392**

Send the **application forms and all supporting documents** - along with a copy of the payment voucher and the check sent to the asbestos fees lockbox - to EPD Asbestos License Unit, 4244 International Parkway, Suite 104, Atlanta, Georgia 30354. **DO NOT send** your application fees to the EPD offices. **DO NOT send** application forms and supporting documents to the Lockbox. We do apologize for this inconvenience and thank you for your prompt compliance with this request.

**PAYMENT VOUCHER**

**Instructions for use:**

After you have completed all sections of the application package for Asbestos Abatement Initial, Renewal, Agent Change or Name Change:

- Fill out the bottom section of this page and attach your check or money order for the correct amount of the application fee in the space provided.
- Make a copy of this page *with the attached check* and send it with the application and supporting documents to the EPD offices.

**Send the original of this page with the check or money order attached to:**

**EPD ASBESTOS FEES  
POST OFFICE BOX 101173  
ATLANTA, GEORGIA 30392**

**DO NOT SEND THE ORIGINAL OF THIS PAGE OR THE ACTUAL CHECK TO THE EPD OFFICES.**

**DO NOT SEND THE APPLICATION PACKAGE AND SUPPORTING DOCUMENTS TO THE POST OFFICE BOX ADDRESS GIVEN ABOVE.**

The application package, supporting documents, a copy of this page and a copy of the application fee should be sent to the EPD offices. The actual fee payment attached to the original of this page should be sent to the post office box address given above.

Application Type: Initial  Renewal   
Agent Change  Name Change

Submitted By: \_\_\_\_\_

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

Check Number: \_\_\_\_\_ Check Amount: \_\_\_\_\_

STAPLE YOUR CHECK OR MONEY ORDER **HERE**

**AFTER YOU ATTACH THE CHECK HERE, MAKE A COPY OF THIS PAGE TO SEND WITH YOUR APPLICATION & SUPPORTING DOCUMENTS TO:**

EPD Asbestos Licenses  
4244 International Parkway, Suite 104  
Atlanta, Georgia 30354

Please *do not send* the actual check with your application – **this page and the actual check must be sent to Post Office Box 101173, Atlanta, Georgia 30392.**

# Georgia Department of Natural Resources

Environmental Protection Division  
Lead-Based Paint & Asbestos Program  
4244 International Parkway, Suite 104, Atlanta, Georgia 30354  
Noel Holcomb, Commissioner  
Dr. Carol Couch, Director  
404/363-7026

## MEMORANDUM

TO: Georgia Asbestos Abatement Contractor License Applicants

FROM: Georgia Environmental Protection Division (EPD), Lead-Based Paint and Asbestos Program

SUBJECT: Asbestos License Application Process

This memorandum provides additional information for completing the attached application for a Georgia Asbestos Abatement Contractor's License. Your participation in and cooperation with Georgia EPD's programs to protect public health and the environment is appreciated.

Be sure to review these documents carefully and refer to them often as you prepare your application package. While at first glance the amount of information requested may seem daunting, by following the attached documents carefully - particularly the checklist portion of the package - you will find it easy to assemble the requested information.

Your final application package should be assembled in a "tabbed" or divided format. The attached checklist explains which information must be included in each section. It is preferred but not required that you hole punch the pages and place them in a binder. Whether or not the pages are bound, the sections must be clearly divided as outlined. EPD reserves the right to return incomplete or inadequately assembled application packages to the applicant for correction and resubmission. Remember that the more complete and concise the information you submit, the better we can evaluate your application. You can expedite the application process greatly by making sure you submit all the requested information correctly the first time. EPD requires a minimum of six weeks to process each application, but clearly the processing time is extended when there are significant problems with the application package.

The Standard Operating Procedure (SOP) seems to be the most difficult portion of the application for many applicants. Much of the requested information can be found by referring to industry manuals and OSHA and EPA regulations. Regardless of the reference material you use, what you must demonstrate with your SOP is an understanding of the regulations and work practices meant to safeguard your employees, public health, and the environment. The SOP need not be a lengthy or highly technical document as long as it conveys a safe and acceptable manner for conducting asbestos abatement that falls within regulatory guidelines.

Georgia EPD's asbestos rules (copy attached) only require each Asbestos Abatement Contractor to license one Primary Agent to supervise asbestos abatement projects conducted by that firm. Many companies opt to license additional properly trained supervisors, but it is not required. Your firm may utilize additional supervisors on asbestos abatement projects without additional licensure provided those individuals have current and acceptable training documents in possession while on the job site. If you still wish to license additional supervisors, submit *copies* of current training documents and an additional \$100 fee for each additional license requested. After you have calculated the fees due, attach a check or money order made payable to "EPD Asbestos Fees" to the payment voucher and submit it to the EPD Asbestos Fees Lockbox. Send the rest of the application materials to the address provided.

Apart from the caveats covered above, you should find the bulk of the application is self-explanatory and easily addressed with the forms provided. However, should you need assistance or guidance with any portion of the application, or have any other questions, please call the Telephone Duty Officer at (404) 363-7026.

Thank you again for your interest and participation in this important program. We look forward to working with you in the future.

/mw  
Attachments

**GEORGIA ASBESTOS CONTRACTOR LICENSE APPLICATION  
SUBMITTAL CHECKLIST AND  
APPLICANT VERIFICATION OF INFORMATION**

Have you mailed all applicable license fees and the payment voucher? (attach a copy of voucher and check)  
0Yes      0No

**THE INFORMATION DESCRIBED IN THE CHECKLIST BELOW MUST BE SUPPLIED AS EVIDENCE OF ELIGIBILITY FOR ALL PERSONS SEEKING A LICENSE TO ABATE FRIABLE ASBESTOS CONTAINING MATERIAL. THE REQUIRED INFORMATION MUST BE PRESENTED IN A TABBED OR DIVIDED NOTEBOOK FORMAT, WITH EACH SCHEDULE (1 - 4) COMPRISING A SECTION IN THE NOTEBOOK. FOR EACH SCHEDULE, PRESENT ALL INFORMATION AS THOROUGHLY AS POSSIBLE AND IN CHRONOLOGICAL ORDER WHERE APPLICABLE. AS YOU COMPLETE EACH SCHEDULE AND CHECK-OFF THE ITEMS LISTED BELOW, SIGN AND DATE THE VERIFICATION OF INFORMATION AS INDICATED FOR EACH TAB. RETURN THIS COMPLETED CHECKLIST/VERIFICATION OF INFORMATION WITH YOUR APPLICATION PACKAGE. IF YOU HAVE QUESTIONS REGARDING THE PREPARATION OF THE APPLICATION, CALL 404/363-7026.**

Contractor/Company Name (Please Print):

Primary Agent (Please Print):

Chief Executive Officer/Responsible Signatory (Please Print):

**TAB ONE – Completed Application & Schedule of Fees, Notary of Certification, Agent Verification of Information Form, and This Completed Form**

**TAB TWO - Schedule 1 – Standard Operating Procedures**

Describe the Standard Operating Procedures (SOP) you propose to use for abatement techniques during all removal and encapsulation of friable asbestos containing materials. At a minimum, your SOP must address the following items in detail:

Detailed Information Included Y/N?

A. Type of protective clothing, respirators, and safety equipment that will be used:

B. Personal decontamination procedures that will be used:

C. Process for asbestos training for workers and supervisors:

D. Removal and/or encapsulation and/or enclosure methods:

E. Procedure to be used for handling waste containing asbestos:

F. Final clean-up and visual inspection procedures:

G. Final air monitoring procedures and clearance level to be achieved:

**Applicant Verification of Information for Schedule One – Standard Operating Procedures:**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in Schedule One – Standard Operating Procedures of the attached application for Asbestos Abatement Contractor in the State of Georgia. I certify under penalty of law that I have personally examined and am familiar with the information submitted in the Standard Operating Procedure:

\_\_\_\_\_  
Company Owner/President

\_\_\_\_\_  
Date

<b>TAB THREE - Schedule 2 – Three (3) Previous Asbestos Abatement Projects Completed or Supervised by the PRIMARY AGENT. This information should be inserted at Tab Three.</b>	Detailed Information Included Y/N?
<b>PROJECT 1:</b> Company Name, <i>Business Office</i> Contact Person, and Contact Phone Number of Client for Whom Work Was Conducted:	
Project Site Address:	
Copy of NESHAP Notification Letter Attached:	
Air Monitoring Data, Including Final Clearance:	
Company Name, <i>Business Office</i> Contact Person, and Contact Phone Number of asbestos waste transporter(s):	
Name and Address of Disposal Sites for This Project:	
<b>PROJECT 2</b> Company Name, <i>Business Office</i> Contact Person, and Contact Phone Number of Client for Whom Work Was Conducted:	
Project Site Address:	
Copy of NESHAP Notification Letter Attached:	
Air Monitoring Data, Including Final Clearance:	
Company Name, <i>Business Office</i> Contact Person, and Contact Phone Number of asbestos waste transporter(s):	
Name and Address of Disposal Sites for This Project:	
<b>PROJECT 3</b> Company Name, <i>Business Office</i> Contact Person, and Contact Phone Number of Client for Whom Work Was Conducted:	
Project Site Address:	
Copy of NESHAP Notification Letter Attached:	
Air Monitoring Data, Including Final Clearance:	
Company Name, <i>Business Office</i> Contact Person, and Contact Phone Number of asbestos waste transporter(s):	
Name and Address of Disposal Sites for This Project:	
<p><b>Applicant Verification of Information for Schedule Two – Projects Completed by PRIMARY AGENT:</b></p> <p>I certify under penalty of law that I have personally examined and am familiar with the information submitted in Schedule Two – Projects Completed by Primary Agent of the attached application for Asbestos Abatement Contractor in the State of Georgia. I certify under penalty of law that I have personally examined and am familiar with the information submitted in this schedule and that the information submitted is true, accurate and complete:</p> <p>_____ Date _____</p> <p>Company Owner/President</p>	



**APPLICATION AND SCHEDULE OF FEES  
FOR  
GEORGIA ASBESTOS ABATEMENT CONTRACTOR LICENSE**  
Complete and return all application materials to:

**Georgia Environmental Protection Division  
ATTN: Maggie Williams  
4244 International Parkway, Suite 104  
Atlanta, Georgia 30354**

FOR PROGRAM USE ONLY			
Recd. By:	Date Received:	Check Number:	Sent to Lockbox Date:
Deposit Number:		Deposit Date:	Check Amount:
<b>1. COMPANY INFORMATION:</b>			
Company Name			
Company Street Address (Do Not Use PO Box)			
City		State	Zip
Company Phone Number		Company Fax Number	
Company E-Mail Address:			
Company Web-Site Address:			
Company Owner/President:			
Primary Contact Person (If Different from Owner/President):			
<b>2. PRIMARY AGENT INFORMATION:</b>			
Agent Name:			
Agent Home Address (Do Not Use PO Box):			
City:		State:	Zip:
Agent Social Security Number:		Agent Date of Birth:	
Agent Height:	Agent Weight:	Agent Sex:	
Georgia EPD Asbestos Rules only require one Primary Agent per Licensed Asbestos Abatement Contracting Firm. However, some companies prefer to "license" additional supervisors under the company name. There is a \$100 fee for each additional individual in addition to the initial \$100 fee for the Primary Agent/Company License. Complete the fee schedule below and send a check for the appropriate amount to the lockbox address. Remember to submit the required training docur supervisors "licensed." Attach additional sheets if needed to list additional licensees.			
License Type		Fees Due	Amount Paid
Primary Agent/Abatement Company		<b>\$100.00</b>	
<b>Additional Supervisor 1</b>		<b>\$100.00</b>	
<b>Additional Supervisor 2</b>		<b>\$100.00</b>	
		<b>Total Sent to Lockbox</b>	
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 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, authentic and complete.			
_____ Signature of Company Owner/President		_____ Date	

**NOTARY OF CERTIFICATION FOR  
GEORGIA ASBESTOS ABATEMENT CONTRACTOR APPLICANT**

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**This completed form must accompany your application package.**

I, \_\_\_\_\_, do hereby certify that  
(Company Owner/President)

\_\_\_\_\_  
(Agent Name)

is applying for a license as an Asbestos Abatement Contractor and is authorized to act  
as an Agent for

\_\_\_\_\_  
(Company Name)

\_\_\_\_\_  
Company Owner/President

\_\_\_\_\_  
Date

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I, \_\_\_\_\_, do hereby certify that  
(Notary Name)

\_\_\_\_\_  
(Company Owner/President)

personally appeared before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_,  
and affixed his/her signature to this document.

Notary Public Signature: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

Affix Notary Seal Here:

# Asbestos Contractor Primary Agent Verification of Information

**This Completed Form Must Accompany All Asbestos Contractor Initial, Renewal, Agent Change and Company Name Changes Applications**

## 1. Agent Information (Application will be returned unless all information is completed in full)

Current License Number (if Applicable):		Expiration Date:	
Last Name		First Name	MI
Applicant Street Address			
City		State	Zip
Phone Number ( )	Cell Phone Number: ( )	Fax Number ( )	
Social Security Number		Height	Weight
E-mail		DOB	Sex

## 2. Asbestos Abatement Contracting Company Information

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

## 3. Agent 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 certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attached documents; that the submitted information is true, accurate and complete; and by my signature attest to the following (please check each box to indicate agreement and understanding):

- I have read, understand, and am familiar with the Standard Operating procedure manual submitted as part of the application package for this company, and agree to follow and abide by all the provisions contained therein.
- I have read, understand, and am familiar with Georgia and federal rules regarding asbestos abatement and disposal, and agree to follow and abide by all the provisions contained therein.
- The training certificates submitted along with this application are valid, unaltered, and obtained in a legitimate manner.
- The experience/project supervision information submitted along with this application is correct and accurate.
- I accept responsibility for ensuring that all applicable state and federal regulations and accepted work practices will be complied with during the execution of all asbestos abatement projects authorized by this license.

\_\_\_\_\_  
Signature of Primary Agent

\_\_\_\_\_  
Date

# ASBESTOS CONTRACTOR DISCLOSURE STATEMENT

This completed form along with any supporting documentation comprises Tab Four, Schedule Three of the Asbestos Contractor Application.

Georgia Environmental Protection Division Rule 391-3-14-.04 states in part that "the application for a license or renewal of a license shall be accompanied by . . . information to demonstrate:

1. A description of any asbestos abatement activities conducted by the applicant that have been terminated prior to completion including the circumstances of the termination;
2. A list of any contractual penalties that the applicant has paid for breach or noncompliance with contract specifications of asbestos abatement activities;
3. Identifications of any citations levied against the applicant by any Federal, State, or local government agencies for violations relating to asbestos abatement;
4. A description of all legal proceedings, law suits or claims that have been filed or levied against the applicant for asbestos related activities;"

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

President/Owner: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

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 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 information submitted is true, accurate and complete.

Please complete this section **as it relates to your company**:

### EITHER

The above referenced firm **Has Not** been subject to any of the above listed actions.

\_\_\_\_\_  
Printed Name of Company Owner/President

\_\_\_\_\_  
Signature of Company Owner/President

### OR

This Firm **Has Been** subject to item(s) \_\_\_\_\_ of the actions listed above.

Action Taken (continue on attached pages if needed): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Printed Name of Company Owner/President

\_\_\_\_\_  
Signature of Company Owner/President