



# Asbestos Abatement Supervisor Application

Occupational Licensing

[www.oklahoma.gov/labor](http://www.oklahoma.gov/labor)

OKLAHOMA DEPARTMENT OF LABOR

409 NE 28<sup>th</sup> St

Oklahoma City, OK 73105

405-521-6100/888-269-5353

<b>APPLICATION TYPE</b>	<b>APPLICATION FEE</b>	<b>Please make your Check, Money Order or Cashier's Check payable to ODOL</b>
<input type="checkbox"/> New	\$50.00	
<input type="checkbox"/> Renewal	\$50.00	

**REQUIRED DOCUMENTATION FOR NEW APPLICANTS:**

- Copies of Original Contractor/Supervisor training class and all subsequent refresher courses\*
- Copies of Confined Space Entry\*
- Copies of NIOSH 582 or Air Monitoring\*
- Copies of current First Aid/CPR Training class

**\*Training must have been provided by any accredited training provider approved by the U. S Environmental Protection Agency or Oklahoma Department of Labor.**

**U.S. CITIZENS:**

- Affidavit of Lawful Presence, signed
- A valid, unexpired Driver's License **OR** State Issued Photo-Identification Card **OR** Military ID **AND**
- Birth Certificate **OR** Social Security Card **OR** A valid, unexpired passport **OR** A W-2 form from current employer

**NON-U.S. CITIZENS:**

- Verification of Immigration Status
- Affidavit of Lawful Presence, signed
- A valid, unexpired Driver's License **OR** State Issued Photo-Identification Card **OR** Military ID **AND**
- Birth Certificate **OR** Social Security Card **OR** A valid, unexpired passport **OR** A W-2 form/1099 form from current employer

All applicants can appear **IN PERSON** at the Oklahoma Department of Labor, ODOL approved facility, or provide a current passport photo on initial application and every 10 years thereafter

**REQUIRED DOCUMENTATION FOR RENEWAL APPLICATION**

- A **copy** of your current drivers license or state issued photo ID card
- Copy(s) of current refresher training class\*
- Copy(s) of Current First Aid/CPR training class

DOL License #, if not new:
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**APPLICANT INFORMATION**

<b>Name:</b>	<b>Date of Birth</b>	<b>Social Security #:</b>
<b>Mailing Address:</b>	<b>City:</b>	<b>State:</b>
		<b>Zip Code:</b>
<b>Phone:</b> (    )	<b>E-mail Address:</b>	
<b>Receive text notifications?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO		
<b>Company Name &amp; License #:</b>		
<b>Company Address:</b>	<b>City</b>	<b>State</b>
		<b>Zip</b>
<b>Company Phone #:</b>	<b>Company Contact Person:</b>	

FOR OFFICE USE ONLY

The Department of Labor will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability or political beliefs. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.	<b>Date:</b>	<b>Lic #:</b>	<b>Receipt #:</b>
	<b>Initials:</b>	<b>Payment Type</b>	<b>Amount:</b>

Do you currently hold any other Oklahoma Asbestos Licenses?

YES

NO

If yes, please indicate the type of license and the license number below:

License Type	License #
Worker	
Inspector	

License Type	License #
Mgmt Planner	
Project Designer	

Do you have any asbestos violations?

YES

NO

If yes, please list job and type of violation:

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**Abatement Projects – NEW APPLICANTS MUST COMPLETE THIS SECTION**

List six (6) abatement projects on which you worked:

1. Employer: _____ Phone: _____ Project Name: _____ Dates from/to: _____ Contact Person _____	2. Employer: _____ Phone: _____ Project Name: _____ Dates from/to: _____ Contact Person _____
3. Employer: _____ Phone: _____ Project Name: _____ Dates from/to: _____ Contact Person _____	4. Employer: _____ Phone: _____ Project Name: _____ Dates from/to: _____ Contact Person _____
5. Employer: _____ Phone: _____ Project Name: _____ Dates from/to: _____ Contact Person _____	6. Employer: _____ Phone: _____ Project Name: _____ Dates from/to: _____ Contact Person _____

Employer Name:	
Employer Address:	
Dates from/to:	Contact Person:
Employer Name:	
Employer Address:	
Dates from/to:	Contact Person:
Employer Name:	
Employer Address:	
Dates from/to:	Contact Person:

**MILITARY STATUS**

\*Within the past six (6) months, have you been honorably discharged from the Armed Forces of the United States, coming off Active Duty as a member of the National Guard or Reserves, or transferred from another state to Oklahoma? Yes No

If yes, provide date of discharge/transfer: \_\_\_\_\_

\*Are you a spouse of an active duty member of the Armed Forces of the United States? Yes No

I hereby authorize the educational institutions to release verification of completion of the courses presented in this application.

I further affirm, upon my oath, to follow Title 40 of the Oklahoma Statutes, Section 450 through 456, and the Abatement of Friable Asbestos Materials Rules OAC 380, Chapter 50. I understand that a violation of any law or rule may subject my license to be suspended or revoked, or may subject me to cease and desist orders, injunctive measures, and criminal penalties for criminal violations.

I, upon my oath, do state that the above information is a true statement, and further state that I am not under any type of disciplinary action, including license revocation or suspension, by any State or political division thereof, or by the United States government, for any illegal or improper activity, civil or criminal, involving asbestos-containing material.



Signature of Applicant / *APPLICATION CANNOT BE PROCESSED WITHOUT A SIGNATURE AND FEE*

DATE

**380:50-5-8. Licensing of asbestos abatement supervisors**

Licensing requirements for asbestos abatement supervisors are as follows:

- (1) Applications shall be submitted on forms prescribed by the Commissioner.
- (2) The license fee shall be Fifty dollars (\$50.00) per year.
- (3) The license shall be issued for a period not to exceed one year and shall expire concurrently with the asbestos training and subsequent refresher training. There will be no grace period wherein a supervisor will be allowed to work with an expired license.
- (4) Asbestos abatement supervisors shall have successfully completed and shall provide documentation for:
  - (A) an asbestos abatement supervisor's course and all subsequent supervisor refresher training which fully meets the requirements of Section 380:50-6-3 and 380:50-6-8.
  - (B) a two day, or equivalent, course in confined space entry following the NIOSH curriculum in confined space entry.
  - (C) the NIOSH 582 course in Analysis of Airborne Asbestos Dust, or equivalent, or a minimum of a two day course in air monitoring techniques.
  - (D) current cardiopulmonary resuscitation (CPR) training, which may be provided by The National Heart Association, The American Red Cross, or other approved training provider.
  - (E) current first aid training, which may be provided by the American Red Cross, or other approved training provider.
  - (F) six (6) months experience as an asbestos abatement worker on job sites that have been inspected by DOL, including a minimum of six (6) different abatement projects or containments, or one year experience as an asbestos abatement worker and six months as an asbestos abatement supervisor on projects which have not been inspected by DOL.
- (5) Licenses shall be issued in the name of the applicant and shall be valid only when working for a licensed contractor.
- (6) License cards shall be available at the job site for inspection by the Department of Labor.

**380:50-6-3. Initial training for asbestos contractors and supervisors**

- (a) In the State of Oklahoma, anyone seeking accreditation or licensure from the Department of Labor, must obtain their training from an EPA or DOL accredited training provider, including but not limited to educational institution, labor union, or government agency, or from a private vocational education provider licensed by the state where it operates (pursuant to 70 O.S. § 21-103 within the state of Oklahoma) and accredited by EPA or an EPA approved governmental agency.
- (b) Such institutions, labor unions or government agencies may receive their DOL approval through the Oklahoma Accreditation Plan providing the following criteria are met:
  - (1) The training for asbestos contractor/supervisor shall be specific to the discipline and shall not be combined with training for any other discipline.
  - (2) The contractors/supervisor's course shall be no less than five days in length and shall include: lectures, demonstrations, at least 14 hours of hands-on training, individual respirator fit testing, course review and an written examination. Hands on training must permit Contractor/ Supervisors to have actual experience performing tasks associated with asbestos abatement. The OAP also recommends the use of audio-visual materials to complement lectures, where appropriate. One day of training equals 8 hours, including breaks and lunch.
  - (3) Course instruction must be provided by EPA or State approved instructors. EPA or State approval shall be based on a review of the instructor's academic credentials and/or field experience in asbestos abatement.



**AFFIDAVIT OF LAWFUL PRESENCE BY PERSON MAKING APPLICATION FOR A LICENSE, PERMIT, OR CERTIFICATE**

I, the undersigned applicant, being of lawful age, state that one of the following statements is true and correct (check which of the following statements apply):

- I am a United States citizen.
- I am a qualified alien under the Federal Immigration and Nationality Act and lawfully present in the United States.

Alien or Admission Number: \_\_\_\_\_

I state under penalty of perjury under the laws of Oklahoma that the forgoing is true and correct and that I have read and understand this form and executed it in my own hand.

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

City & State: \_\_\_\_\_ Print Name: \_\_\_\_\_

If applying to renew a license, permit, or certificate, please write the number: \_\_\_\_\_

**INSTRUCTIONS FOR USE OF THE AFFIDAVIT OF LAWFUL PRESENCE BY PERSON MAKING APPLICATION FOR A LICENSE, PERMIT, OR CERTIFICATE**

The person signing this form must read these instructions carefully

1. If the person executing this form is receiving services and not making an application for a license, permit, or certificate, this form should **not** be used, but rather, either the form titled "***Affidavit of Lawful Presence by Parent or Guardian Receiving Services***", or the form titled "***Affidavit of Lawful Presence by Person Receiving Services***" should be used.
2. If the person executing this form is a citizen of the United States, then that person should check the box to the left of the statement "***I am a United States citizen***". If the person executing this form is not a citizen of the United States, but is a qualified alien under the Federal Immigration and Nationality Act, and is lawfully present in the United States, then that person should check the box to the left of the statement "***I am a qualified alien under the Federal Immigration and Nationality Act and lawfully present in the United States***".
3. In the space after the word "***Date***", the person executing this form should write today's date. In the space after the words "***City & State***", the person executing this form should indicate the city and state where they are actually located when they sign this form.
4. Within the context of the execution of this form, the term "penalty of perjury" means the willful assertion of the fact of either United States citizenship or lawful presence in the United States as a qualified alien, and made upon one's oath or affirmation and knowing such assertion to be false. Making such a willful assertion on this form knowing it to be false is a crime in Oklahoma, and may be punishable by a term or incarceration of no more than five (5) years in prison. Additionally, one who procures another to commit perjury is guilty of the crime of subornation of perjury and may be punished in the same manner as he would be if personally guilty of the perjury so procured.