

Asbestos Training Provider License

The Asbestos Training Provider License requires the submission of a completed application packet, which includes the completed application form on page 2 and 3 and the required documents listed on the Application Requirements Verification Check List.

NOTE: The application requirements are excerpts from the Arkansas Pollution Control and Ecology Commission Regulation 21 Section 14. You may find detailed explanations of any requirement by visiting our website at <https://www.adeg.state.ar.us/regs/#reg21>. Associated application forms may be obtained at <http://www.adeg.state.ar.us/air/asbestos/asbestos.htm>

APPLICATION REQUIREMENTS VERIFICATION CHECK LIST

Follow the **ASBESTOS TRAINING PROVIDER LICENSE APPLICATION REQUIREMENT VERIFICATION CHECK LIST** to ensure that you include all required documents. An incomplete application packet (form and documents) may be returned without processing.

1. Indicate method of payment on application form. Include payment if paying by check or money order.
2. Complete ALL fields on application form.
3. Submit Disclosure Statement
 - 3a. Initial (NEW) applicants provide entire disclosure form complete with original signatures.
 - 3b. Renewal applicants provide only the first and last pages of the disclosure form if no changes have occurred; otherwise provide the entire form.

NOTE: Governmental entities, consisting only of subdivisions or agencies of the federal government, agencies of the state government, counties, municipalities, or duly authorized regional solid waste authorities, are not required to file a disclosure form. **However, employees of these entities must still file a disclosure form.**

4. Submit a letter certifying that each course the provider teaches will comply with requirements of Title 40, CFR Part 763, Appendix C To Subpart E Model Accreditation Plan (MAP) and Arkansas Pollution Control And Ecology Commission Regulation 21, Asbestos Abatement. **Required for initial (NEW) license ONLY.**

NOTE: Applicants who do not send a letter as described above should call ADEQ Asbestos Section at 501-682-0718 for alternative instructions.

5. Submit statement that each discipline course complies with the minimal course content required in Chapter 19 of Regulation 21. **Required for initial (NEW) license ONLY.**
6. Submit resumés of all training instructors to ADEQ for approval before they begin teaching. **Required for initial (NEW) license ONLY.** As a courtesy, renewal applicants may submit resumés of new training instructors. New instructors' resumés should be submitted to ADEQ for approval before they begin teaching classes.
7. Submit sample course agendas. **Required for initial (NEW) license ONLY.** As a courtesy, renewal applicants may submit agendas if they have changed since last application.
8. Deliver or mail completed packet (replacement request form and required documents) to:

ADEQ Asbestos Program
5301 Northshore Drive
North Little Rock, AR 72118-5317

Application will not be processed until payment is received.



ARKANSAS
Department of Environmental Quality

ASBESTOS PROGRAM

5301 NORTHSORE DRIVE / NORTH LITTLE ROCK / AR 72118-5317
TELEPHONE: 501-682-0718 / FAX 501-682-0710
www.adeq.state.ar.us

Asbestos Training Provider License

APPLICATION FORM

APPLICATION TYPE INFORMATION

I. APPLICATION TYPE: INITIAL (NEW) RENEWAL ADD DISCIPLINE Current License Number: _____

APPLICATION FEE & PAYMENT METHOD INFORMATION

II. APPLICATION FEE: \$375 ANNUAL FEE
PAYMENT METHODS: CHECK/MONEY ORDER INCLUDED Check or Money Order Number: _____
CASH (WALK-INS ONLY)
CREDIT CARD (ONLINE ONLY) Note: Transaction fee may apply.
If you opt to pay by credit card, we will contact you with an INVOICE NUMBER for ONLINE USE.

BUSINESS INFORMATION

III. BUSINESS TYPE:
CO-OP PARTNERSHIP GOVERNMENT
CORPORATION PROPRIETORSHIP COLLEGE/UNIVERSITY

Business Name: _____
Address: _____
City: _____ State: _____ ZIP: _____
Business Phone: _____ Business FAX: _____
Email Address: _____ Website: _____
Business Contact Person: _____ Contact Title: _____

CURRICULUM INFORMATION

IV. CURRICULUM INFORMATION

a. COURSE(S) TO BE TAUGHT: (CHECK ALL THAT APPLY):

AIR MONITOR	CONTRACTOR SUPERVISOR	INSPECTOR	MANAGEMENT PLANNER	PROJECT DESIGNER	WORKER	TWO-HOUR AWARENESS
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INITIAL

REFRESHER

ENGLISH

SPANISH

b. Minimum number of students per class: _____ Maximum: _____

c. Has the organization received prior course approval from EPA? YES NO Date of Approval: _____

d. Has the organization received approval from any other state(s) having accreditation requirements that meet or exceed the requirements of the EPA model accreditation plan? YES NO

If yes, list state(s): _____

e. Has the organization been refused by the EPA or any state to conduct asbestos training courses? YES NO

f. Indicate category in which changes are expected for the coming year:

Curriculum Agenda Manuals Handouts

For each category checked, attach a description of changes and a copy of the new material. If new handouts are introduced during the year, send copies to ADEQ.

VALIDATION AND CERTIFICATION INFORMATION

As an authorized representative (owner, partner, or corporate officer), I affirm that the provided information is accurate.

Printed Name: _____ Title: _____

Signature: _____ Date: _____

ADEQ ASBESTOS ABATEMENT PROGRAM USE ONLY

DATE RECEIVED:		RECEIVED BY:	
DATE PROCESSED		INVOICE NUMBER:	
TYPE OF ID PROVIDED:			
NOTES:			