



MISSOURI DEPARTMENT OF NATURAL RESOURCES
 AIR POLLUTION CONTROL PROGRAM (ASBESTOS)
ASBESTOS OCCUPATIONAL CERTIFICATION RENEWAL

| FOR APCP USE ONLY | |
|-------------------|--------------|
| DATE RECEIVED | CHECK DATE |
| CHECK NUMBER | CHECK AMOUNT |

GENERAL INSTRUCTIONS

Asbestos occupational certification (except for Air Sampling Professionals) expires one year from its effective date unless it is renewed annually. For certification renewal, Missouri Air Conservation Law, Chapter 643 RSMo and Missouri state rule, 10 CSR 10-6.250 require the individual to successfully complete a Missouri state approved annual refresher course and examination. The individual should score at least 70% on the refresher course examination. The refresher course must be specific to the certification for which the individual initially received training. In addition, the refresher course should meet the requirements of the EPA Asbestos Hazard Emergency Response Act (AHERA) Model Accreditation Plan, 40 CFR Part 763. The individual shall complete the Certification Renewal Form (one form per occupation), submit refresher training course certificates, submit two recent passport-size color photographs of the applicant's face, and submit the renewal fee to the address below. In the case of significant changes to the Missouri Asbestos statutes or regulations, the applicant must also take and pass, with a score of at least 70%, a revised Missouri State Asbestos Examination. If this test is required, a Missouri State Asbestos Exam Fee must also be submitted with this application. Make checks payable to Missouri Air Pollution Control Program. The individual will be recertified when all fees and information required in this form have been submitted and reviewed and the individual receives their certificate and identification card from the Director.

Mail the completed application forms, training certificates, photographs, and fees to the following address:

MISSOURI DEPARTMENT OF NATURAL RESOURCES
 AIR POLLUTION CONTROL PROGRAM (ASBESTOS)
 P.O. Box 176
 Jefferson City, Missouri 65102

PART A AUTHENTICATION

| | | | |
|--------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF APPLICANT (LAST NAME, FIRST NAME, MI) | | SOCIAL SECURITY NUMBER | |
| HOME ADDRESS (STREET/APARTMENT) | | EMAIL | |
| CITY | STATE | ZIP CODE | |
| MISSOURI CERTIFICATE NUMBER ISSUED BY THE AIR POLLUTION CONTROL PROGRAM | | TELEPHONE NUMBER WITH AREA CODE | |
| PRESENT EMPLOYER | | | |
| EMPLOYER'S ADDRESS | | EMAIL | |
| CITY | STATE | ZIP CODE | |
| EMPLOYER'S TELEPHONE NUMBER WITH AREA CODE | | INDICATE CONTACT INFORMATION <input type="checkbox"/> HOME ADDRESS <input type="checkbox"/> EMPLOYER ADDRESS NOTE: The address indicated will be used to contact you with regard to your certification, to mail your certificate and identification card, and as a contact address on the APCP weblists. | |
| ARE YOU CERTIFIED IN OTHER STATES? <input type="checkbox"/> YES <input type="checkbox"/> NO If so, list states: | | | |

| TYPE OF CERTIFICATION DESIRED (CHECK ONLY ONE PER APPLICATION): | | |
|-----------------------------------------------------------------|-------------|------------------------------------|
| Occupation | Renewal Fee | Missouri Exam Fee (if applicable)* |
| <input type="checkbox"/> Worker | \$5 | \$25 |
| <input type="checkbox"/> Supervisor | \$5 | \$25 |
| <input type="checkbox"/> Project Designer | \$5 | \$25 |
| <input type="checkbox"/> Inspector | \$5 | \$25 |
| <input type="checkbox"/> Management Planner | \$5 | \$25 |

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*The Missouri State Asbestos Exam is in addition to the course-specific test. Renewal applicants whose Missouri asbestos occupational certification has been expired for a period greater than one year must retake and pass the Missouri State Asbestos Exam. If you are required to take the Missouri State Asbestos Exam, submit the \$25.00 fee with this application. Make checks payable to Missouri Air Pollution Control Program. If you are applying for certification in more than one occupation, only submit one Missouri Exam fee. Failure to submit the correct fees will delay the processing of your application.

I hereby certify that all of the information provided in this application is complete and true to the best of my knowledge. I further certify that I will comply with Chapter 643 RSMo, 10 CSR 10-6.080, 10 CSR 10-6.241, and 10 CSR 10-6.250.

| | |
|------------------------|------|
| SIGNATURE OF APPLICANT | DATE |
|------------------------|------|

PART B TRAINING INFORMATION

NOTE Photograph Requirements: Submit two recent passport-size color photographs of your face without a hat or sunglasses per application. Computer generated or photocopied photographs are not acceptable.

Attach a copy of your most current refresher training certificate from a Missouri Accredited Training Provider.

PART C SUPPLEMENTAL INFORMATION

SPECIALTY AREA

PART LETTER

SUBPART NUMBER