

City of Philadelphia ♦ Department of Public Health

Asbestos Project Inspector Recertification Application

NOTE – This application is for BOTH the API Refresher class and the Recertification

DO NOT WRITE IN THIS BOX • OFFICIAL USE ONLY

API Number:

Application complete?

Acceptable Unacceptable

PHMC Check Number:

City of Philadelphia Check Number:

Certification Expiration Date:

May 31, 2014

Send to: PHMC
260 South Broad St., 18th Floor
Philadelphia, PA 19102
Phone 215-731-6190
Fax (215) 731-6199
Attention: Scott Booker
sbooker@phmc.org

Applicant Information (please print)

NAME:

ADDRESS:

CITY: STATE:

ZIP CODE:

PHONE:

EMAIL ADDRESS:

Applicant Employer Information (please print)

COMPANY NAME:

ADDRESS:

CITY: STATE:

ZIP CODE:

PHONE:

FAX:

Dates you wish to attend the **2013** API Refresher class (please check two):

- | | |
|---|--|
| <input type="checkbox"/> Thursday, April 11, 10am to 2pm | <input type="checkbox"/> Wednesday, May 8, 10am to 2pm |
| <input type="checkbox"/> Wednesday, April 17, 8:45am to 12:45pm | <input type="checkbox"/> Friday, May 17, 10am to 2pm |
| <input type="checkbox"/> Wednesday, April 24, 10am to 2pm | <input type="checkbox"/> Tuesday, May 21, 6pm to 10pm |
| <input type="checkbox"/> Tuesday, April 30, 2pm to 6pm | <input type="checkbox"/> Wednesday, May 29, 2pm to 6pm |

* Please make sure that **BOTH** of the following checks are submitted with this application for each applicant *

- Course application fee, payable to "PHMC": **\$85.00**
 Recertification fee, payable to "CITY OF PHILADELPHIA": **\$150.00**

MUST include letter from your employer authorizing you to use their **Business Tax Account Number** and **Commercial Activity License Number**

I hereby acknowledge and understand that certified APIs that are affiliated with an Asbestos Contractor may not fulfill the sampling, visual inspection, or other continuous monitoring as required by Title 6 of the Philadelphia Code and the Asbestos Control Regulation on Major Asbestos Projects. See Phila. Code §§ 6-601(46), 6-604(2)(c).

I hereby certify that the foregoing statements are true and furthermore, that I will use only Analytical Testing Laboratories certified by the Department of Licenses and Inspections to perform analysis. This certification is made subject to the penalties set forth in 18 P.A.C.S. §4909 relating to unsworn falsification to authorities.

Signature of applicant:

Date:

Approved by:

Date: