

CITY OF PHILADELPHIA ~ DEPARTMENT OF
PUBLIC HEALTH
**ASBESTOS LABORATORY
CERTIFICATION APPLICATION**
(Please Print or Type Information)

DO NOT WRITE BELOW - OFFICE USE ONLY!

APPLICATION/LICENSE NUMBER:

APPLICATION:

- Acceptable PCM TEM PLM INDIVIDUAL PCM
 Unacceptable

RECEIVED:

PROCESSED:

APPROVED:

ENTERED:

EXPIRATION DATE:

APRIL 30

RETURN TO:

PHMC
ATTN: RICH KIRSCHNER
ASBESTOS LABORATORY CERTIFICATION
260 SOUTH BROAD STREET
PHILADELPHIA, PA 19102-5085

(215) 790-7211

1. NAME OF APPLICANT:

2. SOCIAL SECURITY NUMBER:

3. ADDRESS OF APPLICANT:

CITY:

STATE:

ZIP CODE:

4. FOR COMPANIES: NAME OF OWNER OR AUTHORIZED REPRESENTATIVE:

TELEPHONE NUMBER: ()

5. FOR INDIVIDUALS: NAME & ADDRESS OF EMPLOYER PROVIDING AIHA AAR LISTING:

TELEPHONE NUMBER: ()

6. Philadelphia Business Tax Account Number:

7. Philadelphia Business Privilege License:

8. LICENSE TYPE:

APPLICATION CODE

LICENSE FEE

EXPIRATION DATE

ASBESTOS LABORATORY LICENSE

3625

\$375.00

4/30

INDIVIDUAL LICENSE

3625

\$375.00

4/30

TOTAL FEES: \$ _____

***** MAKE CHECK OR MONEY ORDER PAYABLE TO: CITY OF PHILADELPHIA *****

9. ATTACHMENTS: PLEASE LABEL AS LISTED BELOW, CHECK BOXES AND ATTACH APPROPRIATE DOCUMENTATION.

A. FOR PHASE CONTRAST MICROSCOPY (PCM) ANALYSIS:

- COPY OF CURRENT CERTIFICATE FROM THE AIHA
 P.A.T. NUMBER

C. FOR POLARIZED LIGHT MICROSCOPY (PLM) ANALYSIS:

- COPY OF CURRENT ACCREDITATION CERTIFICATE FROM THE NIST
 NVLAP CODE NUMBER

B. FOR TRANSMISSION ELECTRON MICROSCOPY (TEM) ANALYSIS:

- COPY OF CURRENT ACCREDITATION CERTIFICATE FROM THE NIST
 NVLAP CODE NUMBER

D. FOR INDIVIDUAL PCM ANALYSIS:

- COPY OF CURRENT LETTER FROM THE AIHA APPROVING YOUR LISTING ON THE BOARD APPROVED AAR OR MOST RECENT AAR RESULTS
 AAR NUMBER
 LETTER FROM YOUR EMPLOYER AUTHORIZING YOU TO USE THEIR **BUSINESS TAX ACCOUNT and BUSINESS PRIVILEGE LICENSE NUMBERS**

I HEREBY CERTIFY THAT THE FOREGOING STATEMENTS ARE TRUE AND FURTHERMORE THAT:

- (1) THIS LICENSE IS VALID AS LONG AS THE APPLICANT MAINTAINS CURRENT ACCREDITATION WITH THE APPROPRIATE ACCREDITATION ORGANIZATION AS STATED ABOVE
(2) ALL OTHER APPLICABLE FEDERAL, STATE AND LOCAL STATUTES, ORDINANCES AND REGULATIONS SHALL BE OBSERVED. THIS CERTIFICATION IS MADE SUBJECT TO THE PENALTIES SET FORTH IN 18 PA.C.S. §4901 RELATING TO UNSWORN FALSIFICATION TO AUTHORITIES.

10. SIGNATURE OF APPLICANT OR AUTHORIZED PRERESENTATIVE:

PRINTED NAME:

DATE:

APPROVED BY:

DATE: