

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:

Send to: Air Management Services
321 South University Ave.
Philadelphia, PA 19104
2nd Floor Asbestos Unit
Phone (215) 685-7576

Attention: (Licensing & Certification Clerk)

City of Philadelphia Check Number:

Certification Expiration Date:

May 31, 2022

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:

EMAIL:

Dates you wish to attend the 2021 API Refresher class (please check two):

- | | |
|-----------------------------------------------------------------------------|--------------------------------------------------------------------------|
| <input type="checkbox"/> Thursday, April 15, 2021 (10 am to 2 pm) (webinar) | <input type="checkbox"/> Thursday, May 6, 2021 (10 am to 2 pm) (webinar) |
| <input type="checkbox"/> Thursday, April 22, 2021 (10 am to 2 pm) (webinar) | <input type="checkbox"/> Thursday, May 13, 2021 (10 am to 2 pm)(webinar) |
| <input type="checkbox"/> Friday, April 30, 2021 (10 am to 2 pm) (webinar) | <input type="checkbox"/> Thursday, May 20, 2021 (10 am to 2 pm)(webinar) |
| <input type="checkbox"/> Thursday, June 17, 2021 (10 am to 2 pm) (webinar) | |

* 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": **\$225.00 *(Amended Fee 01/03/2019)**

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

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. §4904 relating to unsworn falsification to authorities.

Signature of applicant:

Date:

Approved by:

Date:

