

## OKLAHOMA DEPARTMENT OF LABOR

3017 N. Stiles, Suite 100 Oklahoma City, OK 73105 405-521-6100/888-269-5353 M-F 8:00am-4:30pm

APPLICATION TYPE	<b>APPLICATION FEE</b>				-							
□New \$25.00				Please make your Check, Money Order								
Renewal	\$25.00		or Cashier's Check payable to ODOL									
REQUIRED DOCUMENTATION FOR NEW APPLICANTS:												
Copies of Original Worker or Contractor/Supervisor training class and all subsequent refresher courses*												
*Training must have been provided Agency or Oklahoma Department U.S. CITIZENS:  • Affidavit of Lawful Presence, and the Avalid, unexpired Driver's Lick Identification Card OR Military	Identification Card OR Military ID AND						ate Issued Photo-					
<ul> <li>Birth Certificate <u>OR</u> Social Secure unexpired passport <u>OR</u> A W-2</li> </ul>	ployer	<ul> <li>Birth Certificate <u>OR</u> Social Security Card <u>OR</u> A valid, unexpired passport <u>OR</u> A W-2 form/1099 form from current employer</li> </ul>										
All new applicants must appear <u>IN PERSON</u> at the Oklahoma Department of Labor or ODOL approved facility and every 10 years thereafter												
<ul> <li>REQUIRED DOCUMENTATION FOR RENEWAL APPLICATION</li> <li>A copy of your current driver's license or state issued pho</li> <li>Copy(s) of current refresher training class*</li> </ul>				_ , ,			if not new:					
APPLICANT INFORMATION												
Name:	Date of Birth				Social Security #:							
Mailing Address:	ng Address: City		:y:		State: Zip Code:							
Phone: ( )	ione: ( )			E-mail Ad			idress:					
Hair Color:	Eye Color:		ν	Weight:		Height:						
Company Name & License #:												
Company Address:	City				Sta	ite	Zip					
Company Phone #:	Company Contact Person:											
FOR OFFICE USE ONLY	-			• =			_					
The Department of Labor will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability or political beliefs. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.				ete: itials:	Lic Pav	#: yment Tyr	<u>oe</u>	Receipt #: Amount:				

<del>- : : : : : : : : : : : : : : : : : : :</del>											
Do you currently hold any other Okl	☐ YES	□ NO									
If yes, please indicate the type of license and the license number:											
License Type	License #		License Type License #								
Inspector			Management Planne	r							
Supervisor			Project Designer								
<u> </u>											
Do you have any asbestos violations?											
If yes, please list job and type of violation:											
					<del></del>						
					<del></del>						
MILITARY STATUS											
*Within the past six (6) months, have you been honorably discharged from the Armed Forces of the United States, coming off Active Duty as a											
member of the National Guard or Reserves, or transferred from another state to Oklahoma?											
If yes, provide date of discharge/transfer:											
*Are you a spouse of an active duty member of the Armed Forces of the United States?   Yes   No  I hereby authorize the educational institutions to release verification of completion of the courses presented in this application.											
I further affirm, upon my oath, to follow Title 40 of the Oklahoma Statutes, Section 450 through 456, and the Abatement of Friable Asbestos											
Materials Rules OAC 380, Chapter 50. I understand that a violation of any law or rule may subject my license to be suspended or revoked, or may subject me to cease and desist orders, injunctive measures, and criminal penalties for criminal violations.											
I, upon my oath, do state that the abov											
including license revocation or suspens improper activity, civil or criminal, invo			of, or by the United States	s government, for a	ny illegal or						
improper activity, tivil of criminal, myo	uviilg aspestos-colleg	mus marchar									
Signature of Applicant / APPLIC	CATION CANNOT RE	PROCESSED WITHO	IIT Δ SIGNΔTI IRF ΔΝΟ FI	FF	DATE						
Signature of Applicant / APPLIC	ATION WINNER BE	THOCKSOLD WITHOU	o, a dignature aidu fi	<b></b>							
		<del>,</del>	<del></del>								
380:50-5-9. Licensing of asbestos abat		e as follows: /1\ Appli	rations shall be submitted	l on forms prescribe	ad by the						
Licensing requirements for asbestos abatement workers are as follows: (1) Applications shall be submitted on forms prescribed by the Commissioner. (2) The license fee shall be twenty-Five dollars (\$25.00) per year. (3) The license shall be issued for a period not to exceed one											
year and shall expire concurrently with											
worker will be allowed to work with ar the previous asbestos worker training											
380:50-6-7. (5) Asbestos abatement workers shall have successfully completed and shall provide documentation for an asbestos abatement											
worker's course and all subsequent worker refresher training which fully meets the requirements of Section 380:50-6-2 and 380:50-6-7.  (6) The licenses shall be issued in the name of the individual applicant and shall be valid only when working for a licensed contractor.											
(7) License cards shall be available at t				S TOT A RECUISED COUL	40001.						
380:50-6-2. Initial training for asbesto	s workers										

(a) In the State of Oklahoma, anyone seeking accreditation or licensure from the Department of Labor, must obtain their training from an EPA or DOL accredited training provider, including but not limited to educational institution, labor union, or government agency, or from a private vocational education provider licensed by the state where it operates (pursuant to 70 O.S. § 21-103 within the state of Oklahoma) and accredited by EPA or an EPA approved governmental agency. (b) Such institutions, labor unions or government agencies may receive their DOL accreditation through the Oklahoma Accreditation Plan providing the following criteria are met: (1) The training for asbestos abatement worker shall be specific to the discipline and shall not be combined with training for any other discipline. (2) The Worker's course shall be no less than four days in length and shall include: lectures, demonstrations, at least 14 hours of hands-on training, individual respirator fit testing, course review and an examination. Hands on training must permit workers to have actual experience performing tasks associated with asbestos abatement. The OAP also recommends the use of audio-visual materials to complement lectures, where appropriate. One day of training equals 8 hours, including breaks and lunch. (3) Course instruction must be provided by EPA or State approved instructors. EPA or State approval shall be based on a review of the instructor's academic credentials and/or field experience in asbestos abatement. (4) The training course for Asbestos Abatement Worker shall adequately address the requirements listed in OAC 380:50-6-2 and 380:50-6-7