

Mississippi Department of Environmental Quality

Application for Lead-Based Paint Third Party Exam

1. Type of Exam			
Check the box(es) for the type of third party exam for which you are applying. For explanation regarding the training and education requirements associated with each individual discipline, please refer to Rule 9.4 of the Regulations for Lead-Based Paint Activities.			
a <input type="checkbox"/> Lead Inspector		b <input type="checkbox"/> Lead Risk Assessor	
c <input type="checkbox"/> Lead Supervisor			
2. Application Information			
Date of Application		Social Security Number (Last four digits) xxx-xx-_____	
Last Name		First Name	MI
Applicant Street Address			
City		State	Zip
Age	Sex	Height	Weight
Phone Number		Fax Number	E-mail
3. Previous Training			
You must attach a copy of all training certificates applicable to the discipline marked above.			
4. Fees			
Please enclose applicable fee of \$75.00 (non-refundable). Make your check or money order payable to Mississippi Department of Environmental Quality (please note 'LEAD' on your check or money order). NO CASH WILL BE ACCEPTED.			
5. Affidavit			
I certify that the information contained herein and attached hereto is true and complete.			
_____ Printed Name of Applicant			
_____ Signature of Applicant		_____ Date of Application	

Please remit application and all requested information including applicable fees to the following address:

Mississippi Department of Environmental Quality
P.O. Box 2261
Jackson, Mississippi 39225

For Overnight/Express Mail:
Mississippi Department of Environmental Quality
Asbestos and Lead Branch
515 East Amite Street
Jackson, Mississippi 39201

For Office Use Only - Do Not Write in This Box			
Check Amount	Check Number	Received By	Date Received
Test Score	Pass	Fail	