

## APPLICATION FOR INITIAL LEAD ABATEMENT SUPERVISOR CERTIFICATION

Use this form if you were trained in Wisconsin. Your Social Security number (SSN) is collected only to determine delinquency in payment of child support or state taxes. It won't be made public. If delinquent, your certification will be denied under Wis. Stat. §§ 250.041 or 254.115.

### 1. APPLICANT INFORMATION

Name—First	Middle	Last	Suffix(Jr, Sr, III)
Social Security Number (required)	Date of Birth (mm/dd/yyyy)	Height feet          inches	Weight
Mailing Address	City	State	Zip Code
Phone Number	Email		

### 2. QUALIFICATIONS—You must meet option A or B. Check the option that applies to you.

**A. One (1) year certified as a lead abatement worker.**

**B. Two (2) years of experience in a related field** (can be unpaid). Describe below, attaching additional pages if needed.

Employer/Organization	From (mm/yy)	To (mm/yy)
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Related Experience (e.g., remodeling, home inspection, property management)

### 3. TRAINING Provide info on your initial training.

Training Provider	Class End Date	City
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### 4. CERTIFICATION EXAM—Select your exam location. We will schedule your exam no earlier than 2 weeks after you apply.

Remote (Zoom)       Eau Claire       Green Bay       Madison       Milwaukee

Exam Language (if not English)	Exam Accommodations (e.g., large-print, audio exam)
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### 5. COMPANY INFORMATION—Individuals must be associated with a certified lead company listed below.

Company Name	DHS Company Number
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### 6. ENFORCEMENT ACTION—If yes, attach documents explaining what action was taken, why, and by whom.

Within the past five (5) years, was action taken against you for a civil or criminal violation of any federal, state, or local lead-based paint or other environmental statute or regulation?  No  Yes

### 7. \$350 FEE—Make check or money order payable to DHS or apply online with a VISA or Mastercard at <http://dhs.wi.gov/WALDO>.

The \$350 fee includes a \$275 certification fee and a \$75 exam registration fee. State/local government employees may attach [F-02992](http://dhs.wi.gov/F-02992) to request a certification fee exemption but must pay the exam registration fee.

### 8. SIGNATURE

I affirm that the information submitted on this application is correct. I understand that any false information provided may be grounds for denying or revoking my certification. I understand that I must comply with Wisconsin lead regulations.

SIGNATURE—Applicant	Date Signed
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#### Apply right away so you can:



- Supervise lead abatement activities. Use your training diploma as temporary proof of certification.
- Take the state exam. You must pass the test within 6 months of class and can try up to 3 times. There are no extensions, so don't delay!

#### Mail your application and payment to:



State of Wisconsin  
Box 93419  
Milwaukee, WI 53293-3328

Questions? Call 608-261-6876.