



# Application and Instructions for Training Providers

## Applying for Accreditation of Lead- Based Paint Activity and Renovation Training Programs

ACCREDITATION APPLICATION FOR TRAINING PROGRAMS (CONTINUED) Form Approved OMB No. 2070-0155 Expires 08/31/04

**Completion of Accredited Lead-specific Training Requirement of §745.225(c)(2)(ii):**  
Check as many that apply and complete information for each. Attach additional sheets of paper, as necessary.

Discipline:  Inspector  Supervisor  Risk Assessor  Project Designer  Abatement Worker

Name of Training Program: \_\_\_\_\_  
State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
City: \_\_\_\_\_  
Month/Day/Year: \_\_\_\_\_

**ACCREDITATION APPLICATION FOR TRAINING PROGRAMS**  
FOR Accreditation of Lead-Based Paint Activities

**Important:** Consult the Instructions for Training Programs Applying for Accreditation of Lead-Based Paint Activities and the official requirements reprinted there to complete this form. **Please type or print responses in black or blue ink only.**

**A. General Information**  
Select one of the following application types:  
 Initial accreditation application  
 Re-accreditation application  
 Adding additional jurisdiction(s) to accreditation/amending accreditation  
 Replacement of a certificate

Indicate the course(s) for which you seek accreditation or re-accreditation. List all EPA-run jurisdiction(s) in which you intend to conduct lead-based paint activity training. An EPA-run jurisdiction includes an EPA-run state, U.S. territory, or all Indian tribal land(s) in any one EPA Region. Attach additional sheets of paper, as necessary.

The fee you must pay depends on the number of disciplines and EPA-run jurisdiction(s) in which you plan to conduct lead-based paint activity training. See the fees schedule in the instruction booklet to determine your fee. The total fee listed below should include fees calculated on any additional sheets.

	Inspector	Supervisor	Risk Assessor	Project Designer	Abatement Worker	Fee
1 <sup>st</sup> EPA-run jurisdiction* (pay base accreditation fee only)	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
2 <sup>nd</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
3 <sup>rd</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
4 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
5 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
6 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
7 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
8 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
9 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
10 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
11 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
12 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
13 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
14 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
15 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
16 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
17 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
18 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
19 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
20 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
21 <sup>st</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
22 <sup>nd</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
23 <sup>rd</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
24 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
25 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
26 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
27 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
28 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
29 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____
30 <sup>th</sup> EPA-run jurisdiction*	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	<input type="checkbox"/> I <input type="checkbox"/> R	\$ _____

1 = Initial R = Refresher

\* EPA-run jurisdiction\* (pay base accreditation fee only)

2<sup>nd</sup> EPA-run jurisdiction\*  
 Check here if you are listing additional EPA-run jurisdiction(s). List on additional sheets of paper and attach, as necessary. Each additional jurisdiction \$35 per discipline, per jurisdiction. (See the definition of EPA-run jurisdiction(s) and the fee examples in the instruction booklet. For current listing of EPA-run jurisdictions, see [www.epa.gov/lead](http://www.epa.gov/lead) or call 1-800-424-LEAD.

Worker courses in a language other than English (list each language separately):  
(Note: Only worker course(s) can be taught in a language other than English. \$1,700 for initial course, \$1,010 for refresher course, and \$35 for each additional EPA-run jurisdiction per language.)

Do you request a fee waiver as a:  
 Local government applicant  
 Nonprofit applicant: (Nonprofit means an entity that has demonstrated to any branch of the Federal Government or to a state, municipal, tribal, or territorial government, that no part of its net earnings inure to the benefit of any private shareholder or individual.)  
If your training program designation is nonprofit. If another agency/state has designated your nonprofit, specify the IRS-issued number below and submit a copy of an official IRS letter confirming such designation. If another agency/state has designated your nonprofit, specify the IRS-issued number and attach appropriate documentation.

501(c)(3) (IRS-issued number)  501(c)(5) (IRS-issued number)  501(c)(9) (IRS-issued number)  Other \_\_\_\_\_

**B. Applicant Information**  
Name of Training Program and Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Business, State, Agency, etc.: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Applicant's Phone #: (\_\_\_\_) \_\_\_\_\_ ext. \_\_\_\_\_ Applicant's Fax #: (\_\_\_\_) \_\_\_\_\_  
Applicant's E-mail Address: \_\_\_\_\_

EPA Form 8500-25 (Rev. 07/02)

Page 1 of 4

Training Diploma Transcript Certificate

EPA Form 8500-25 (Rev. 07/02)

Page 2 of 4

EPA Form 8500-25 (Rev. 07/02)

Page 4 of 4

**[This page intentionally left blank.]**



**ACCREDITATION APPLICATION  
FOR TRAINING PROVIDERS**

U.S. ENVIRONMENTAL PROTECTION AGENCY

**Important:** Consult the instructions provided for training programs applying for accreditation to complete this form.  
**Please type or print response in black or blue ink only.**

**A. General Information**

Select one of the following application types:

- Accreditation application
- Re-accreditation application
- Adding jurisdiction[s] to accreditation/amending accreditation
- Replacement of a certificate

Indicate the course[s] for which you seek accreditation or re-accreditation. List all EPA-run jurisdiction[s] in which you intend to conduct lead-based paint activity training. An EPA-run jurisdiction includes an EPA-run state, a U.S. territory, or all Indian tribal land[s] in any one EPA Region. Attach additional sheets of paper as necessary. EPA accreditation for renovator, and/or dust sampling technician training is valid in all EPA-run jurisdictions (i.e., National Accreditation).

The fee you must pay depends on the number of disciplines and/or EPA-run jurisdiction[s] in which you plan to conduct lead-based paint training. See the fees schedule in the instructions to determine your fee. The total fee listed below should include fees calculated on any additional sheets.

Official Use Only

For information on EPA and other Lead Programs, see: <http://www.epa.gov/lead>.  
Check to be listed on EPA's web site:  
For Evaluation and Abatement  
For Renovation  
I do not want to be listed

I=Initial R=Refresher	Inspector		Supervisor		Risk Assessor		Project Designer		Abatement Worker		Renovator		Dust Sampling Technician		Fee	
	I	R	I	R	I	R	I	R	I	R	I	R	I	R		
1 <sup>st</sup> EPA-run jurisdiction (pay base fee only)																\$
2 <sup>nd</sup> EPA-run jurisdiction																\$
National Accreditation																\$

Check here if you are listing additional EPA-run jurisdiction[s]. List each additional jurisdiction in the box below as necessary (N/A to renovators and dust sampling technicians). Each additional jurisdiction is \$35 per discipline, per jurisdiction. See the definition of EPA-run jurisdiction[s] and the fee examples in the instructions. For current listing of EPA-run jurisdictions, see [www.epa.gov/lead](http://www.epa.gov/lead), or call 1-800-424-LEAD.

Courses in an **electronic learning format**, or a language **other than English** (list each separately):

(\$ \_\_\_\_\_ for initial course, \$ \_\_\_\_\_ for refresher course, and \$ \_\_\_\_\_

for each additional EPA-run jurisdiction per language)

**Total Fee: \$ \_\_\_\_\_**

Do you request a fee waiver as a:  Local Government  State Government  Federally Recognized Indian Tribe  Nonprofit

(Nonprofit means an entity that has demonstrated to any branch of the Federal Government, or to a state, municipal, tribal, or territorial government, that no part of its net earnings inures to the benefit of any private shareholder or individual.)

If your training program designation is nonprofit, specify the IRS-issued number below and submit a copy of an official IRS letter confirming such designation. If another agency/state has designated your nonprofit status, indicate the agency/state and corresponding identification number and attach appropriate documentation.

501(c)(3)                      501(c)(5)                      501(c)(9)                      Other  
 IRS-issued #                      IRS-issued #                      IRS-issued #

**B. Applicant Information**

Name of Training Program & Street Address:

Business, State, Agency, etc.

Street Address, Suite Number (Please no P.O. Box)

City

State

Zip Code

Mailing Address:

Address

City

State

Zip Code

Applicant's Phone #:

ext.

Fax #:

Applicant's E-mail Address:

Please list all types of facilities and locations at which training will take place and indicate if you plan to train at nonpermanent facilities. Attach additional sheets of paper, as necessary.

Type of Facility      Street Address, Suite Number (Please no P.O. Box)      City      State      Zip Code

Type of Facility      Street Address, Suite Number (Please no P.O. Box)      City      State      Zip Code

Do you plan to provide training at non-permanent facilities      Yes      No

Note: A non-permanent facility is accessed by the training provider (typically through a rental or short-term lease agreement) on a one-time or occasional basis. This would include motel facilities and other locations that serve as a temporary training location.

**C. Qualifications of Training Program Manager**

Name of Training Program Manager:

Last

First

Middle

Training Program Manager's Title:

Previous and/or Maiden Name(s), if applicable:

**Teaching Workers or Adults Requirement of §745.225(c)(1)(i), (ii), or (iii):**  
 Check one of the following:

Experience	or	Education	or	Training	or	Bachelors or graduate degree in any field	or	Experience managing a training program specializing in environmental hazards
------------	----	-----------	----	----------	----	---	----	--

Check the supporting documentation attached for the box checked above:

<b>Experience</b>	<b>Education</b>	<b>Training</b>	<b>Bachelors</b>	<b>Management Experience</b>
Resume	Diploma	Certificate	Diploma	Resume
Letter of Reference	Transcript		Transcript	Letter of Reference
Documentation of Work Experience				Documentation of Work Experience

**Construction Industry Requirement of §745.225(c)(1)(iv):**  
 Check one of the following:

Experience	or	Education	or	Training
------------	----	-----------	----	----------

Check the supporting documentation attached for the box checked above:

<b>Experience</b>	<b>Education</b>	<b>Training</b>
Resume	Diploma	Certificate
Letter of Reference	Transcript	
Documentation of Work Experience		

**D. Qualifications of Principal Course Instructor (Attach a separate sheet for each individual.)**

Name of Principal Course Instructor for each course:

(If more than one, attach additional sheets.)

Last

First

Middle

Previous and/or Maiden Name(s), if applicable:

**Teaching Workers or Adults Requirement of §745.225(c)(2)(i):**  
 Check one of the following:

Experience	or	Education	or	Training
------------	----	-----------	----	----------

Check the supporting documentation attached for the box checked above:

<b>Experience</b>	<b>Education</b>	<b>Training</b>
Resume	Diploma	Certificate
Letter of Reference	Transcript	
Documentation of Work Experience		

**Completion of (16 hrs) Accredited Lead-specific Training Requirement of §745.225(c)(2)(ii):**

Check as many that apply and complete information for each. Attach additional sheets of paper, as necessary.

Discipline: Inspector Supervisor Risk Assessor Project Designer Abatement Worker  
Renovator (8hrs) Dust Sampling Technician (8hrs)

Name of Trainer: Name of Training Program:

Training Program Address: Street Address, Suite Number City State Zip Code

Training Program Phone #: ext. Date Training Completed: Month/Day/Year

Training Certificate Identification Number:

**Construction Industry Requirement of §745.225(c)(2)(iii):**

Check one of the following:

Experience or Education or Training

Check the supporting documentation attached for the box checked above:

<b>Experience</b>	<b>Education</b>	<b>Training</b>
Resume	Diploma	Certificate
Letter of Reference	Transcript	
Documentation of Work Experience		

**E. Lead-Based Paint Activity or Renovation Violations**

Does training Program have any past, present, or pending lead based paint activity, or renovation violations of EPA, state, U.S. territory, or Indian tribal land(s) regulations? **If yes**, please attach a written explanation. Yes No

**F. Certification of Course Training Material**

I certify that I am using the course training materials as marked in the boxes below for each of the courses that I am seeking accreditation as required by §745.225(b)(1)(iii). My signature in Section I applies to this Section F.

	Inspector	Supervisor	Risk Assessor	Project Designer	Abatement Worker	Renovator	Dust Sampling
EPA Recommended Training Materials							
Authorized State course/program							
Other LBP Training							

**G. Re-accreditation Applicants Only**

Use the following space to describe any changes to the training facility equipment or course materials since the training program's last application was approved. Attach additional sheets of paper as necessary.

**H. Additional Information**

Use the following space for any additional information or comments that you feel are relevant and want EPA to consider with your application. Attach additional sheets of paper as necessary.

**I. Certification Statement**

Privacy Act Statement: This statement is provided pursuant to the Privacy Act of 1974, 5 U.S.C. §552a. The authority for collecting this information is 40 C.F.R. Part 745, and 15 U.S.C. §§2682 and 2684. The information collected on this form will be used to establish the applicant's eligibility to receive accreditation to conduct training in the field of lead-based paint activities in target housing and child-occupied facilities. Disclosure of this information is voluntary; however, the failure to provide this information may delay or prevent an applicant's accreditation. This information may be disclosed in appropriate and limited circumstances to: EPA employees, contractors, grantees or others when performing duties that are compatible with the purpose for which this information is collected and when this information is necessary to complete the task; a member of Congress in response to a request made with your consent and on your behalf; to appropriate law enforcement agencies responsible for investigating, enforcing, prosecuting or implementing specific statutes, codes or regulations and this information is relevant to that responsibility; an appropriate adjudicative body when such disclosure is compatible with the purpose for which this information is collected and the EPA or the United States has an interest in the proceeding; and the Department of the Treasury, the General Services Administration, the General Accounting Office and other Federal, State, and Local Agencies for authorized activities related to this information.

I certify that the training program described in Parts A through H of this application, including any attachments, meets the requirements established in paragraph (c) of 40 CFR § 745.225. I hereby attest and affirm that the information included on this application, including any attachments, is true and accurate to the best of my belief and knowledge. I acknowledge that any accreditation issued pursuant to this application, including any attachments, will be subject to revocation if issuance was based on incorrect or inadequate information that materially affected the decision to issue the accreditation. I also attest and affirm that I will maintain my accreditation(s) according to 40 CFR § 745.225 and conduct lead-based paint training only in those disciplines and geographical areas in which I have received accreditation.

A false statement on this form may lead to prosecution under 18 U.S.C. 1001 or to imposition of applicable criminal and civil penalties and/or administrative remedies.

--	--

Training Program Manager's Signature

Date Signed

(Please print this form then sign legibly within the boundaries of the box above.)

---

**Before you mail your application and accreditation fee, make sure that you have:**

---

- Filled out all applicable sections of the application
- Signed and dated the application
- Made a copy of your application for your files
- Enclosed education, experience, and other documentation for the Training Program Manager and Principal Course Instructor
- Enclosed a description of facilities and equipment
- Enclosed the course test blueprint
- Enclosed a description of activities and procedures for hands-on skills assessment
- Enclosed quality control plan(s)
- Enclosed course manual(s) and course agenda(s)
- Enclosed the appropriate accreditation fee(s) (check or money order)
- Printed "Lead Program User Fees" on the check or money order

For more information, review the attached application instructions.

**Please print out this form, sign it above, then mail original completed application, supporting materials, and the certification to:**

**U.S. EPA  
Lead User Fees  
P.O. Box 979072  
St. Louis, MO 63197-9000**

## INSTRUCTIONS FOR TRAINING PROGRAMS APPLYING FOR ACCREDITATION OF LEAD-BASED PAINT ACTIVITIES COURSES

---

You may apply to the U.S. Environmental Protection Agency (EPA) for accreditation or re-accreditation of a lead-based paint initial course(s) and/or refresher course(s) in either Lead Abatement or Renovation, Repair and Painting (RRP).

Under lead abatement, EPA offers accreditation for training providers in the following disciplines: **Inspector**, **Supervisor**, **Risk Assessor**, **Project Designer**, or **Abatement Worker**.

Under lead RRP, EPA offers national accreditation to training providers in the following two disciplines: **Renovator** and **Dust Sampling Technician**.

EPA offers accreditation in states, U.S. territories, and all Indian tribal land(s) where EPA directly implements the lead-based paint accreditation program. If EPA does not administer the accreditation program in an area you wish to conduct training, you must apply directly to that state, territory, or Indian tribe for accreditation.

These instructions supplement OMB approved form No. 2070-0155, *Accreditation Application for Training Providers*.

Please note that you must use a separate application form for each application type (i.e., initial accreditation, re-accreditation, amending accreditation, or replacement of a certificate).

For example, if you are applying for initial accreditation for lead RRP as a renovator and dust sampling technician, and re-accreditation in two lead abatement disciplines you must submit two separate application forms for the initial accreditation and re-accreditation requests.

### How to Apply for Initial Accreditation

To apply for accreditation of a training program[s], please provide the following:

- 1) Complete, sign and date the Accreditation Application for Training Providers (OMB form No. 2070-0155).
- 2) Calculate the appropriate fee using the fees schedule provided with these instructions.
- 3) Provide education, experience, and other documents for the Training Program Manager and Principal Course Instructor.
- 4) Enclose the following materials with your application for each course for which you apply (see detailed discussion of each item later in this document):
  - a. Description of training facilities and hands-on training equipment;
  - b. Course test blueprint;
  - c. Description of activities and procedures for conducting the hands-on skills assessment; and
  - d. Quality control plan(s), described in 40 CFR § 745.225(c)(9).
- 5) Indicate whose course materials you will use:
  - a. EPA model training materials. Enclose a copy of the first five pages of the instructor and student manuals that are being used for each course for which you've applied.
  - b. EPA-authorized state or Indian tribe approved. Enclose a copy of the agenda and first five pages of the student and instructor manuals for each course for which you've applied.
  - c. Your own. For all course materials that are not EPA model training or training approved by an EPA-authorized state or Indian tribe, enclose a complete copy of

the student and instructor manuals, or other materials to be used, for each course for which you've applied. Additionally, provide a copy of the agenda for each course.

Note: When applying for accreditation of a course in a language other than English, include a signed statement from a qualified, independent translator that the course was compared to the English language version and found to be accurate.

- 6) Print "Lead Program Users Fees" on the check or money order for the fee[s] and mail it with your application to the following address:

U.S. EPA  
Lead User Fees  
P.O. Box 979072  
St. Louis, MO 63197-9000

### **Training Facilities and Hands-on Training Equipment**

Provide an inventory of all training materials that will be used to conduct hands-on activities for each course for which you are applying, or a note indicating that the materials will be used for more than one course.

Provide a detailed description of each facility to be used for the lecture, course test, hands-on training, and assessment activities including a floor diagram and room dimensions.

Class size should be limited to 25, with a maximum of one instructor for every 6 students during the hands-on exercises. Should you plan on class sizes exceeding 25, or higher student/instructor ratio, then provide an explanation as to how you plan to adequately observe and direct hands-on activities.

If you plan to provide training at non-permanent facilities (like a hotel, or any facility that you do not own or maintain) then, in addition to the above, submit a description of the criteria you will use when selecting a training site.

### **Course Test Blueprint**

Provide a copy of the course test blueprint for each course for which you are applying. The course test blueprint is a written document identifying the proportion of course test questions devoted to each major topic in the course curriculum. You should not submit a copy of the course test.

For an initial course, the course test blueprint should use the course topics established in 745.225(d) to identify the proportion of course test questions which should be devoted to each topic.

For a refresher course, the course test blueprint should use the course topics established in 745.225(e)(1) to identify the proportion of course test questions which should be devoted to each topic.



## **Description of Activities and Procedures for Conducting the Hands-on Skills Assessment**

Include a description of the activities and procedures that will be used for conducting the assessment of hands-on skills for each course for which you are applying. This should include: 1) the list of hands-on topics covered in the course, 2) the activities performed for each hands-on topic, and 3) the method to determine the trainee's ability to perform each of the hands-on activities.

## **Quality Control Plan**

Include a copy of the quality control plan. The plan should contain at least the following elements:

1. Procedures for periodic revision of training materials and the course test to reflect innovations in the field.
2. Procedures for the training manager's annual review of principal instructor competency. In situations where the training manager and principal instructor are the same person an objective review of the principle instructor's performance is not possible. In such a case, alternative evaluation methods should be discussed (i.e., student evaluations & feedback, peer review, etc.).
3. For Renovator and Dust Sampling Technician disciplines, an acknowledgement that the trainer understands and will comply with the following items (these items are described in detail at [www.epa.gov/lead/pubs/trainerinstructions.htm](http://www.epa.gov/lead/pubs/trainerinstructions.htm)):
  - Notification requirements and digital photograph submission instructions
  - Recordkeeping requirements
  - Course completion certificate requirements and unique identification number protocol

## **Training Using Video Conference and/or Video Recording**

If you plan to deliver training using a video conference and/or video recording of lecture materials, you should include information on how you plan to conduct the training in the Quality Control Plan. The Quality Control Plan should explain how the course will be delivered, and how the video conference technology and/or video recordings will be used in the delivery. The list below contains examples of the information to be included in the Quality Control Plan:

- Identify the course(s) that will use video conferencing or video recording
- Description of how the instructors and students will interact during the lecture portion of the training
- The location and role of the principle instructor and guest instructors during the training
- The number of students expected at each site
- Materials that will be distributed
- Description of how the course test and hands-on skills assessment will be conducted
- A copy of any video recordings being used for the training delivery must be provided with the application
- Any other pertinent information

Please note that the hands-on portion of the training must be done using the proper equipment for each skill set, and that the hands-on portion and the course test must be given with a principle or quest instructor physically present. Also, the principle instructor must conduct a portion of the course (lecture, hands-on, or both) which must include interaction with students. Therefore, the principle instructors only involvement in the course can't be a video recording.

If you have already received accreditation to perform classroom training and want to conduct training by video conference and/or video recording, you should submit an amended training provider application to EPA indicating such and include an updated quality control plan. You should complete sections A (General Information), B (Applicant Information), H (Additional Information) and I (Certification Statement) of the training provider application. Indicate in section H that you are amending your accreditation to include delivery by video conferencing and/or video recording. You do not need to submit a fee with your amendment.

### **Training Via Electronic-Learning Format**

If you plan to offer training in an electronic-learning (E-learning) format, select "Accreditation application" in section "A". Write "E-learning" in the text field labeled "Courses in electronic-learning format, or a language other than English" and select the appropriate course(s) in the boxes provided. You may also apply to offer E-learning courses in a language other than English by entering this information in the same test box (e.g. E-learning in Spanish).

To offer E-learning you must read the implementation guidelines document entitled "Model Renovation, Repair and Painting (RRP) Rule E-learning Course Component Implementation Requirements." These guidelines are available at <http://www.epa.gov/lead/pubs/toolkits.htm#trainer> and describe the implementation and Learning Management System requirements for providing the E-learning component content.

In your Quality Control Plan, you must describe how you will meet each requirement set forth in this document. If you do not fully address all the requirements your application will be considered incomplete and you will be required to provide additional information potentially delaying the approval process. You must include a copy of the E-learning training course you will be offering in the form of a CD or by including a link to a webpage and user ID and password for EPA access in the Quality Control Plan. This applies whether you are using the model E-learning course or an alternative.

If you are applying to offer only E-learning modules with no in-class presentation of the lecture material, you must indicate whether you will use permanent or non-permanent training facilities for the required hands-on training activities, the in-person hands-on skills assessment and the in-person final exam.

### **How to Apply for Re-accreditation**

All training course accreditations expire every (4) years. To ensure that your training program will be re-accredited before your current accreditation expires, you must submit your re-accreditation application no later than 180 days before the expiration date.

For re-accreditation complete only sections A (General Information), B (Applicant Information), and I (Certification Statement) of the application and follow the mailing instructions described in the "initial accreditation" section of these instructions.

## Amended Application

The training program must notify EPA in writing within 30 days of changing the address specified on its training program accreditation application or when transferring the records from that address, adding a permanent training location (a location where training is routinely provided, and that is controlled and maintained by the trainer), employment of a new training manager or principal instructor, or adding an additional jurisdiction. Such notification is accomplished by submitting an amended application.

Amended applications must be sent to the following address:

U.S. EPA  
P.O. Box 14417  
Washington DC 20044-4417

## Replacement of a Certificate

To replace a certificate, complete only sections A (General Information), B (Applicant Information), and I (Certification Statement) of the application and follow the mailing instructions described in the “initial accreditation” section of these instructions.

## Incomplete Application

If any components of your application are missing, your application will become inactive for a period not to exceed 30 days until the application is made complete. If you do not complete your application, EPA will return the application package. You may apply again with a complete package. Please call 1-800-424-LEAD to see if your application is complete.

## Fees

The fee[s] for applying for accreditation, re-accreditation, and other requests are listed in the following schedule. It is important that you:

- 1) Calculate the fee based on the number of discipline[s] and EPA-run jurisdiction[s] in which you plan to operate.
  - a. If applying for **lead abatement** discipline accreditation, submit a \$35 dollar fee for Indian tribal land[s] located in each EPA Region, (e.g., if applying for accreditation in multiple Indian Tribal lands located in Region 5 and Region 7 you must pay a \$35 fee per Region, or a total of \$70).
  - b. If applying for **lead RRP** discipline accreditation, there is **NO** jurisdictional fee – the accreditation or re-accreditation fee is a National Accreditation for all jurisdictions where EPA administers the program.
- 2) Write your total fee amount in Section A of the application, even if you attach additional sheets of paper listing additional EPA-run jurisdictions for lead abatement disciplines.
- 3) Make the check or money order payable to **U.S. Environmental Protection Agency**. Other methods of payment include wire transfer, electronic funds transfer, and, for government payers, online payment agency collection (OPAC).

## Fee Schedule

Course	Accreditation Fee	Re-accreditation Fee
<b>Lead Abatement Initial Course</b>		
Inspector	\$870	\$620
Supervisor	\$870	\$620
Risk Assessor	\$870	\$620
Project Designer	\$870	\$620
Abatement Worker (English)	\$870	\$620
Abatement Worker (non-English)	\$870	\$620
<b>Lead Abatement Refresher Course</b>		
Inspector	\$690	\$580
Supervisor	\$690	\$580
Risk Assessor	\$690	\$580
Project Designer	\$690	\$580
Abatement Worker (English)	\$690	\$580
Abatement Worker (non-English)	\$690	\$580
<b>Lead RRP Initial Course</b>		
Renovator	\$560	\$340
Renovator Course in a language other than English	\$560	\$340
Renovator Course in an Electronic Format	\$560	\$340
Dust Sampling Technician	\$560	\$340
Dust Sampling Technician Course in a language other than English	\$560	\$340
Dust Sampling Technician Course in an Electronic Format	\$560	\$340
<b>Lead RRP Refresher Course</b>		
Renovator	\$400	\$310
Renovator Course in a language other than English	\$400	\$310
Renovator Course in an Electronic Format	\$400	\$310
Dust Sampling Technician	\$400	\$310
Dust Sampling Technician Course in a language other than English	\$400	\$310
Dust Sampling Technician Course in an Electronic Format	\$400	\$310
<b>Multi-Jurisdictional Lead Abatement Accreditation Fee*</b>	\$35 per discipline for each additional EPA-run jurisdiction**	
<b>Replacement Certificate</b>	\$15	

\* Multi-jurisdictional accreditation applies only to an applicant applying in more than one EPA-run jurisdiction.

\*\* An EPA-run jurisdiction includes an EPA-run state, a U.S. territory, or all Indian tribal land(s) in any one EPA Region (For current list of EPA-run jurisdictions, see [www.epa.gov/lead](http://www.epa.gov/lead) or call 1800-424-LEAD.)

## Fee Examples

- 1) If training program is applying for refresher Worker course accreditation in two states:

Refresher Worker accreditation fee	\$690
One additional state fee*	<u>\$ 35</u>
<b>Total Amount Due:</b>	<b><u>\$725</u></b>
  
- 2) If training program is applying for national accreditation (RRP) for both Renovator and Dust Sampling Technician

Renovator initial accreditation fee	\$ 560
Dust Sampling Technician initial accreditation fee	<u>\$ 560</u>
<b>Total Amount Due:</b>	<b><u>\$1120</u></b>
  
- 3) If training provider is applying for re-accreditation for Abatement Inspector, Worker, and Project Designer refresher courses:

Refresher Inspector re-accreditation fee	\$ 580
Refresher Worker re-accreditation fee	\$ 580
Refresher Project Designer re-accreditation fee	<u>\$ 580</u>
<b>Total Amount Due:</b>	<b><u>\$1740</u></b>
  
- 4) If training program is applying for accreditation to offer the Initial Renovator course in multiple formats

Initial Renovator in-class presentation	\$ 560
Initial Renovator in-class presentation in Spanish	\$ 560
Initial Renovator course offered with E-learning presentation of lecture materials	<u>\$ 560</u>
<b>Total Amount Due:</b>	<b><u>\$1680</u></b>

## EPA's Accreditation Fees Refund Policy

Training programs having submitted an application and associated fees for accreditation or re-accreditation who wish to withdraw their application prior to Agency approval will receive a fee refund based upon the schedule below. **Training programs who request a refund more than 10 days after the Agency receives the application will not receive a 100% refund.**

<b>Number of Days Following Receipt of Application</b>	<b>Percent Reimbursed</b>
Up to 10 days	100%
11 to 60 days	75%
61 to 120 days	50%
121 or more days	25%

**Note:** *Refunds will only be made after EPA verifies fee receipt and deposit by the U.S. Treasury.*

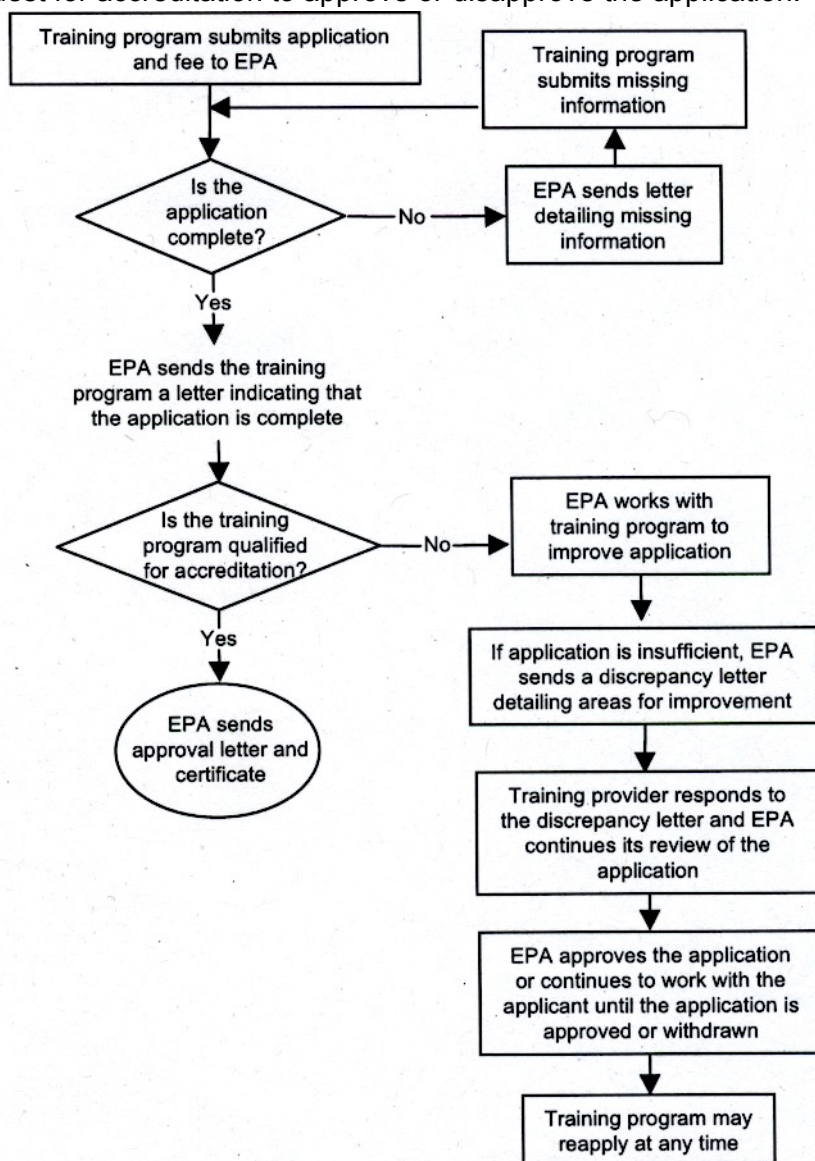
Training programs must notify the Agency in writing in order to qualify for a refund. The date your application is withdrawn is the date the Agency receives the withdraw notification.

EPA will not refund fees after granting a training program accreditation or re-accreditation. Refunds are granted only on a per discipline basis. Therefore training programs must withdraw their applications for a particular discipline in all EPA-run jurisdiction[s] included on the application. If your application is disapproved, EPA will not refund fees.

Refunds are not available for replacing a certificate.

## Application Process for Training Program Accreditation

EPA processes applications on a first-come first-served basis. The flowchart below depicts the application process for training program accreditation. EPA has up to 180 days after receiving a complete request for accreditation to approve or disapprove the application.



**Paperwork Reduction Act Notice:** The annual public burden for this collection of information is estimated to be 27.6 hours per accreditation response, and 4.8 hours per re-accreditation response, including the time needed for reading the instructions and completing the necessary information contained in this form. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden to: Director, Collection Strategies Division, Office of Environmental Information (OEI), U.S. Environmental Protection Agency (Mail Code 2822), 1200 Pennsylvania Avenue, N.W., Washington, D.C. 20460. Include OMB No. 2070-0155 in any correspondence. Do not send the completed form or requested information to this address. The actual information or form should be submitted in accordance with the instructions accompanying the form, or as specified in the corresponding regulations.