

AMEND

State of California - Health and
Human Services Agency

California Department of Public
Health Childhood Lead Poisoning
Prevention Branch

Renewal of Lead Certification

(Not for New Applications)

Instructions: Type or print all information clearly. Complete both sides of this form and attach the required fees and documentation of your continuing education. (Note: Your Continuing Education is good for 2 years, however, you must renew your certificate every year.) Submit your application for renewal to the Department at least **120 calendar days** before the expiration date on your certificate. **Note: your name, certification number, and expiration date will be added to the list of CDPH-certified individuals on the [CLPPB website](http://www.cdph.ca.gov/programs/CLPPB) (www.cdph.ca.gov/programs/CLPPB).**

1. Applicant Information:

Name: _____
Last First Middle Initial

Home Address: _____
Street Address, Apt. No.

City State Zip

Mailing Address: _____
(If different from Company Name
above) Street Address, Apt. No.

City State Zip

Home Phone: (____) ____ - _____ Work Phone: (____) ____ - _____ Date of Birth: ____/____/____
Month Day Year

E-Mail Address: _____

Photo Identification: Number: _____
Type: Driver's License Military ID Card Passport
 State ID Card Resident Alien Card Other ID: _____
Gender: Male Female

2. Type of Renewal: Fill in the certificate numbers, expiration dates and amounts paid for the certificates you wish to renew.

	CDPH Certificate Card Number	Expiration	Fee Due	Amount Paid
Lead Inspector/Assessor Certificate:	_____	____/____/____	\$ 13575.00	\$_____.00
Lead Supervisor Certificate:	_____	____/____/____	\$ 13575.00	\$_____.00
Lead Project Designer Certificate:	_____	____/____/____	\$ 13575.00	\$_____.00
Lead Project Monitor Certificate:	_____	____/____/____	\$ 13575.00	\$_____.00
Lead Worker Certificate:	_____	____/____/____	\$ 13575.00	\$_____.00
Lead Sampling Technician Certificate:	_____	____/____/____	\$ 13575.00	\$_____.00
			Total Amount Paid:	\$_____.00

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3. **Fees:** Enclose the required fees **for each Certificate requested**. (See Fees Due, above.) Payment must be a check or money order payable to California Department of Public Health. Cash is **not** accepted. Fees are **non-refundable**.
4. **Continuing Education:** To show that you completed the required continuing education, enclose the original (pink) Course Completion Form (CDPH 8493) from your lead-related construction continuing education. (NOTE: Continuing Education is only required every 2 years, however, you must renew your certificate every year.)
If you took continuing education prior to your last renewal, and it was less than two years ago, and do not need it this year, check here: **Continuing Education Not Required**
5. **Photograph:** You must include a recent photograph of yourself. It must be in portrait style (see diagram at right). Select one of the follow methods for providing the photo:
- A photo print, at least two inches square (no digital printouts). Print your full name and your identification number such as Lead ID or course completion form on the back.
 - Digital photo, e-mailed to LeadPhotos@cdph.ca.gov. It should be at least 640 x 480 pixels, in JPEG format, and have your name as the file name.
Date e-mailed: _____



I hereby certify, under penalty of perjury, that the information I have provided in this application is true and correct. I further certify that I understand the California Code of Regulations requirement for individuals to maintain documents related to lead hazard projects (that I prepare, perform, or supervise) for a minimum of three years, and make them available to CDPH upon request.

Your Signature: _____ / ____ / ____
Date Signed

Mail Your Renewal To:
California Department of Public Health
Childhood Lead Poisoning Prevention
Branch 850 Marina Bay Parkway
Building P, Third Floor, Box C
Richmond, CA 94804-6403.

Notify the Department within 30
calendar days if your name, address
or phone number changes.

The Department of Public Health, Childhood Lead Poisoning Prevention Branch, requests this information under the Health & Safety Code, Section 105250, in order to determine the eligibility of an individual for Lead Certification. Provision of this information is mandatory. The consequence of not providing this information is denial of certification. This information may be provided to the California Division of Occupational Safety and Health (Cal-OSHA) and California government agencies and officials, as provided by law. You have the right to access records containing your personal information maintained by the Department of Public Health. For information or access to your records, contact the Childhood Lead Poisoning Prevention Branch, 850 Marina Bay Parkway, Building P, Third Floor, Box C, Richmond, CA 94804-6403, Telephone: 1-800-597- LEAD (510-620-5694 outside California).