CITY OF PHILADELPHIADEPARTMENT OF PUBLIC HEALTH ASBESTOS LABORATORY DO NOT WRITE BELOW - OFFICE USE ONLY! CERTIFICATION APPLICATION (Please Print or Type Information) **RETURN TO:** ATTN: Richard Annunziato CERTIFICATION NUMBER: CITY OF PHILADELPHIA APPLICATION: PCM TEM PLM INDIVIDUAL PCM DEPARTMENT OF PUBLIC HEALTH 7801 ESSINGTON AVENUE RECEIVED: PROCESSED: PHILADELPHIA, PA 19153 ASBESTOS CONTROL UNIT APPROVED: ENTERED: For additional information or questions, please call APRIL 30. **EXPIRATION DATE:** <u>(215) 685-7576</u> 1. NAME OF APPLICANT: 2. Check# 3. ADDRESS OF APPLICANT: CITY: STATE: ZIP CODE: 4. FOR COMPANIES: NAME OF OWNER OR AUTHORIZED REPRESENTATIVE: PHONE NUMBER: 5. FOR INDIVIDUALS: NAME & ADDRESS OF EMPLOYER PROVIDING AIHA AAR LISTING: PHONE NUMBER: 6. Phila. Business Tax Account Number: 7. Phila. Business Privilege License Number: APPLICATION CODE CERTIFICATION FEE EXPIRATION DATE 8. CERTIFICATION TYPE: 3625 \$600.00 4/30 □ ASBESTOS LABORATORY CERTIFICATION 3625 \$600.00 4/30 MAKE CHECK OR MONEY ORDER PAYABLE TO: CITY OF PHILADLEPHIA 9. ATTACHMENTS: PLEASE LABEL AS LISTED BELOW AND ATTACH APPROPRIATE DOCUMENTATION. A. FOR PHASE CONTRAST MICROSCOPY (PCM) ANALYSIS: C. FOR POLARIZED LIGHT MICROSCOPY (PLM) ANALYSIS: => COPY OF CURRENT CERTIFICATE FROM THE AIHA => COPY OF CURRENT ACCREDITATION CERTIFICATE FROM THE NIST => P.A.T. NUMBER => NVLAP CODE NUMBER B. FOR TRANSMISSION ELECTRON MICROSCOPY (TEM) ANALYSIS: D. FOR INDIVIDUAL PCM ANALYSIS: => COPY OF CURRENT LETTER FROM THE AIHA APPROVING YOUR => COPY OF CURRENT ACCREDITATION CERTIFICATE FROM THE NIST => NVLAP CODE NUMBER LISTING ON THE BOARD APPROVED AAR OR MOST RECENT AAR **RESULTS** => AAR NUMBER => LETTER FROM YOUR EMPLOYER AUTHORIZING YOU TO USE THEIR BUSINESS TAX ACCT. & BUSINESS PRIVILEGE LICENSE NUMBERS I HEREBY CERTIFY THAT THE FOREGOING STATEMENTS ARE TRUE AND FURTHERMORE THAT: (1) THIS CERTIFICATION IS VALID AS LONG AS THE APPLICANT MAINTAINS CURRENT ACCREDITATION WITH THE APPROPRIATE ACCREDITATION ORGANIZATION AS STATED ABOVE (2) ALL OTHER APPLICABLE FEDERAL, STATE AND LOCAL STATUTES, ORDINANCES AND REGULATIONS SHALL BE OBSERVED. THIS CERTIFICATION IS MADE SUBJECT TO THE PENALTIES SET FORTH IN 18 PA.C.S. 94901 RELATING TO UNSWORN FALSIFICATION TO AUTHORITIES. 10. SIGNATURE OF APPLICANT OR DATE: APPROVED BY: DATE: AUTHORIZED PRERESENTATIVE: