



State of Tennessee
 Department of Environment and Conservation
 Division of Solid Waste Management - Toxic Substances Program
 Davy Crockett Tower, 7th Floor
 500 James Robertson Parkway
 Nashville, TN 37243

APPLICATION TO CONDUCT LEAD-BASED PAINT ACTIVITIES - FIRM

Instructions: Complete and submit the application. Complete all sections of the application in ink. Include all required supporting documentation. Make payments to Treasurer, State of Tennessee by check, money order, or cashier's check - **do not send cash**. Mail application, documentation, and payment to: **State of Tennessee, Department of Environment and Conservation, Division of Fiscal Services - Fee Section, Davy Crockett Tower, 6th Floor 500 James Robertson Parkway, Nashville, TN 37243.**

Application Fee Non-Refundable: Applicants will have 30 days from the date of initial receipt of the application to submit any missing information and/or needed documentation to complete the application process. If an applicant fails to respond within 30 days, the application will be canceled, and the applicant will be required to reapply.

1 - NAME AND ADDRESS

NAME OF FIRM						FEIN	
IF INDIVIDUAL ▶	FIRST NAME		MIDDLE INITIAL	LAST NAME		SOCIAL SECURITY NUMBER	
	AREA CODE / PHONE NUMBER 1	AREA CODE / PHONE NUMBER 2	AREA CODE / FAX NUMBER		E-MAIL ADDRESS		
STREET / MAILING ADDRESS				CITY	STATE	ZIP	

2 - CALCULATING FEES FEES EFFECTIVE 07/01/2024


CHECK YOUR SELECTION; ENTER TOTAL IN COLUMN E:	A. INITIAL 3-yrs CERTIFICATION	B. RE-CERTIFICATION 3-yrs			C. TOTAL AMT ENCLOSED
	<input type="checkbox"/> \$1850	<input type="checkbox"/> \$1850			\$ _____

3 - ENVIRONMENTAL NON-COMPLIANCE ACTIONS (use additional paper if needed)

HAVE YOU EVER RECEIVED A VIOLATION? IF YES, LIST VIOLATION(S)	STATE(S) OF OCCURRENCE

4 - CERTIFICATION AND SIGNATURE

I certify, under penalty of law, that: I am lawfully present in the United States as a U.S. citizen or a qualified alien as defined in 8 U.S.C. §1641(b); this document and all attachments were prepared by me or under my direction or supervision; and, all of the submitted information is, to the best of my knowledge and belief, true, accurate, and complete. I understand that the penalties for providing false information and making false or fraudulent statements or representations may include revocation of the permit, license or accreditation, civil penalties, and/or criminal prosecution resulting in a fine, imprisonment or both. As specified in Tennessee Code Annotated Section 39-16-702(a)(4), this declaration is made under penalty of perjury. I affirm that the work practice standards according to Chapter Rule 0400-13-01-.01 will be followed. I authorize the State of Tennessee to verify any information on or included with this application.

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APPLICANT SIGNATURE

DATE (mm / dd/ yyyy)

PRINTED NAME

http://www.tn.gov/environment/solid-waste/solid-waste_lead-hazard.shtml