



KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
Bureau of Air
Kansas Residential Lead Hazard Prevention Program
1000 SW Jackson Street, Suite 310, Topeka, KS 66612
Toll free: (866) 865-3233 Fax: (785) 599-4246
Email: kdhe.lead@ks.gov Website: www.kshealthyhomes.org



INSTRUCTIONS FOR COMPLETING THE LEAD ACTIVITY FIRM APPLICATION

Please print clearly or type all the information requested on the application.

If your business is a corporation, limited partnership, limited liability company or limited liability partnership please provide the Federal ID number and the Kansas Secretary of State's Business Entity ID number. Information about registering a business with the Kansas Secretary of State is available online at www.kssos.org or by phone at (785) 296-4564. The business must be registered with the Kansas Secretary of State and in good standing.

The processing time for completed applications is generally 5-7 business days. Applications are processed in the order they are received and may take up to 30 days during peak renewal times. Submitting an incomplete application will delay processing. If you do not receive an incomplete application notice or your license within 30 days, please contact our office.

If you have questions regarding this application, please contact our office. We would be happy to assist you!



LEAD ACTIVITY FIRM APPLICATION

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General Information:

All business entities conducting lead-based activities including abatement, lead inspections, risk assessments, project designs or training activities must be licensed as a Lead Activity Firm. All sections of this application are required to be completed. If an application is incomplete, you will be notified and will have 30 days to submit the additional information. Applications may be submitted by mail, email or fax. Please mail applications to:

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 Topeka, KS 66612

A complete application includes:

1. A completed Lead Activity Firm application with no sections left blank; and
2. Payment of the non-refundable application fee as specified in K.A.R. 28-72-3, unless the firm is exempt under K.A.R. 28-72-10(b)(2)(B). Firms exempt are federally recognized Indian tribes, local government or nonprofit organizations. A letter of determination issued by the IRS must accompany the application.

PART A: APPLICATION TYPE		
<input type="checkbox"/> Initial or Previous Expired License \$500	Previous License Number	
<input type="checkbox"/> Initial or Previous Expired License Fee Exemption	Previous License Number	
<input type="checkbox"/> Renewal License \$250	Current License Number	
<input type="checkbox"/> Renewal License Fee Exemption	Current License Number	

PART B: BUSINESS INFORMATION			
Business or Organization Name As It Is To Appear On The License			
Business Legal Owner(s) Name			
Business Street Address			
City	State	Zip	County
Phone Number		E-mail Address	

Lead-Based Paint Activities Conducted: (select all that apply)

<input type="checkbox"/> Lead Abatement	<input type="checkbox"/> Lead Hazard Control	<input type="checkbox"/> Project Design
<input type="checkbox"/> Lead Inspection	<input type="checkbox"/> EBL Inspection	<input type="checkbox"/> Training Provider
<input type="checkbox"/> Risk Assessment		

Please send all correspondence regarding this application to:

- Business Address Email Other: _____

Credit Card Authorization

If you would like to pay for the fee with a credit card, please complete the information below.
Cards accepted are VISA, MASTERCARD, and DISCOVER.

Credit Card Type: Visa Mastercard Discover

Card Number	Expiration Date (Month/Year)	
Card Holders Name as it appears on the Card		
Billing Address for the Card		
City	State	Zip
Telephone Number	Email address to send receipt of transaction	

Total Amount to be charged to card: \$ _____

Signature Authorizing Credit Card Transaction: _____

Printed Name of Authorizing Individual: _____