



## LEAD PAINT INSPECTION CONTRACTORS LICENSE REQUEST TO CHANGE INSPECTOR/RISK ASSESSOR

### NAME AND LICENSE NUMBER

\_\_\_\_\_  
 Name (Print name of licensee)

\_\_\_\_\_  
 LBPI license number

### LEAD PAINT INSPECTION ADDITIONS/DELETIONS

***A licensee must have at least one Inspector or Risk Assessor***

**Add Delete**

\_\_\_\_\_  
 (Print full legal name of Inspector or Risk Assessor)

**Owner**

**Employee**

**Inspector**

**LBP Activities Individual License Number 915** \_\_\_\_\_

**Risk Assessor**

**LBP Activities Individual License Number 915** \_\_\_\_\_

**Add Delete**

\_\_\_\_\_  
 (Print full legal name of Inspector or Risk Assessor)

**Owner**

**Employee**

**Inspector**

**LBP Activities Individual License Number 915** \_\_\_\_\_

**Risk Assessor**

**LBP Activities Individual License Number 915** \_\_\_\_\_

**Add Delete**

\_\_\_\_\_  
 (Print full legal name of Inspector or Risk Assessor)

**Owner**

**Employee**

**Inspector**

**LBP Activities Individual License Number 915** \_\_\_\_\_

**Risk Assessor**

**LBP Activities Individual License Number 915** \_\_\_\_\_

*(Attach separate sheet for additional names)*

### SIGNATURE

I understand that I am adding the above inspector/risk assessor to my LBPI license.

\_\_\_\_\_  
 Your Name (Print name of current LLC member or corporate officer making this request)

(\_\_\_\_\_)\_\_\_\_\_  
 Phone number

\_\_\_\_\_  
 Signature (Required)

\_\_\_\_\_  
 Date (Required)