

# State of Maine

Department of Environmental Protection  
Lead & Asbestos Hazard Prevention Program  
17 State House Station, Augusta, ME 04333  
TEL (207) 287-2651 FAX (207) 287-6220

# Training Course Notification

**Asbestos Training Courses  
Lead Training Courses**

### Important Notice

Training Providers must notify the Department of lead and/or asbestos training courses conducted pursuant to Chapter 424 and/or Chapter 425 within the geographic boundaries of the State of Maine, on forms approved by the Department and at least 10 calendar days prior to the start date of the course. Courses not properly notified to the Department may not be approved by the Department. The Training Provider shall notify the Department via facsimile, e-mail or phone of any course changes, including cancellation of any course no later than 7AM the day of the course.

Training courses conducted pursuant to these rules shall be provided during normal business day hours, Monday to Friday, and no earlier than 7AM and not later than 6PM. Training shall not occur on state holiday days. A course day must not be less than 6 ½ hours or exceed 8 hours in duration, excluding lunch and breaks. Other course days and times may be approved by the Department on a case-by-case basis. Courses must be completed within a two week period. The student to instructor ratio for hands-on portions of training courses shall not be greater than 10 to 1.

**The Department will administer (unless otherwise approved) the final course examination for any refresher lead and/or asbestos training course where the primary and/or secondary instructor plans on taking the final course examination to meet re-certification training requirements.**

#### **Training Provider:**

Company Name: \_\_\_\_\_ Training Provider License # \_\_\_\_\_  
Contact \_\_\_\_\_ Telephone: \_\_\_\_\_

#### **Training Course Information:**

Course Title (category): \_\_\_\_\_ Date Submitted: \_\_\_\_\_  
Course Type:     Asbestos                       Lead                       Initial                       Refresher  
Course Attendance:     Open Course                       Closed Course                      Number of Students: \_\_\_\_\_  
Training Course Date(s): \_\_\_\_\_  
Course Times:    Start: \_\_\_\_\_ End: \_\_\_\_\_  
Primary Instructor: \_\_\_\_\_ Secondary Instructor: \_\_\_\_\_  
 Check box if primary and/or secondary instructor will be taking the final course examination

#### **Physical location of Training Course:**

Company/Site Name: \_\_\_\_\_ Room Number: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_

Mail, fax or email to:  
Sandy Moody, Environmental Technician  
Lead & Asbestos Hazard Prevention Program  
Maine Department of Environmental Protection  
17 SHS, Augusta, ME 04333-0017  
Fax: (207) 287-6220  
sandy.j.moody@maine.gov

Date Received: _____	Comments: _____ _____ _____
Date Approved: _____	
Date Posted: _____	