



**COOK COUNTY DEPARTMENT OF ENVIRONMENTAL CONTROL
69 W. WASHINGTON- SUITE 1900 – CHICAGO, IL 60602-3004
ASBESTOS ABATEMENT CONTRACTOR REGISTRATION APPLICATION**

DATE:		REGISTRATION #: (to be completed by the department)		EXPIRATION DATE: (to be completed by the department)	
Contractor Name & Address (P.O. BOX NOT ACCEPTED):				Telephone: Email: Fax:	
Contact Person Name & Address				City/Zip:	Phone:
Form of Ownership (e.g. corporation, partnership, etc)					
I.D.P.H. Asbestos Contractor License Number		Expiration Date of I.D.P.H. Asbestos Contractor License		Number of years licensed by the State	
MUST PRINT AND SIGN NAME Registered Agent/Owner Name: _____					
Signature: _____					

Any person who knowingly makes a false statement to the Cook County Department of Environmental Control is in direct violation of Cook County Ordinance Chapter 30 and is subject to potential fines and penalties. With my signature, I certify that I am in compliance with Cook County Ordinance Chapter 30 and all other applicable Cook County ordinances and statutes.

CONTRACTOR REGISTRATION WILL BE SUBJECT TO THE FOLLOWING APPLICABLE CONDITIONS:

- (1) If the business is a corporation a copy of the corporation's last annual report filed with the Contractor's state of incorporation must be attached to this form.
- (2) If the business is a corporation, partnership or other firm, identify in a list to be attached to this application, the substantial owners (as defined in Section 34, Article V of the ordinances of Cook County) of the business.
- (3) The provisions of the Cook County Environmental Control Ordinance apply.
- (4) No facsimiles of the original will be accepted and all applications must be mailed or hand carried to this department. You cannot do any asbestos projects in Cook County without a **valid Certificate of Registration**. The registration is valid for 2 years.

REQUIRED DOCUMENTATION:

Space is provided on the back of this form for items 2-5; please use additional sheets if necessary.

- (1) A copy of the Asbestos Contractor License issued by the Illinois Department of Public Health
- (2) A list of all enforcement actions taken against the applicant in the preceding two (2) years for alleged violations of Federal, State or Local Regulations pertaining to the handling, removal or disposal of asbestos containing materials, including information about the alleged violations charged and the disposition.
- (3) A list of supervisors employed by the Asbestos Abatement Contractor who are licensed by the Illinois Department of Public Health.
- (4) A list of asbestos containing material removal and abatement techniques that have previously been employed
- (5) A list of the names and addresses of waste disposal sites and waste haulers primarily used by the Asbestos Abatement Contractor

If you have any questions concerning any of the above provisions, please contact the Department of Environmental Control at (312) 603-8200.

Submit this form to
Cook County Department of Environmental Control
69 W. Washington, Suite 1900. Chicago, IL 60602-3004

Type of Enforcement Action Including all federal, state or local violations regarding construction/asbestos containing materials in the previous 2 years	Date Enforcement Action initiated	Current Disposition (e.g. pending in Administrative hearings, paid fine, etc.)

Supervisor Name	Illinois Department of Public Health License Number

Types of Asbestos removal and abatement techniques most frequently used by this contractor.

Waste Disposal Site (list top 3 most frequently used)	Address/City/State
Waste Hauler (list top 3 most frequently used)	Address/City/State



Cook County Affidavit of Child Support Obligations

Effective July 1, 1998, every applicant for a County Privilege shall be in full compliance with any Child Support order before such Applicant is entitled to receive or renew a County Privilege. When Delinquent Child Support exists, the County shall not issue or renew any county Privilege, and may revoke any County Privilege.

“Applicant” means any person or business entity, including all Substantial Owners, seeking issuance of a County Privilege or renewal of an existing County Privilege from the County. This term shall not include any political subdivision of the federal or state government, including units of local government, and not-for-profit organizations.

“County Privilege” means any business license, including but not limited to liquor dealer’s licenses, packaged goods licenses, tavern licenses, restaurant licenses, and gun licenses; real property licenses or lease; permit, including but not limited to building permits, zoning permits or approvals; environmental certificate; County HOME Loan; and contracts exceeding the value of \$10,000.

“Substantial Owner” means any person or persons who own or hold a twenty-five percent (25%) or more percentage of interest in any business entity seeking a County Privilege, including those shareholders, general or limited partners, beneficiaries and principals; except where a business entity is an individual or sole proprietorship, Substantial owner means that individual or sole proprietor.

All Applicants/Substantial Owners are required to complete this affidavit and comply with the Child Support Enforcement Ordinance before any privilege is granted. Signature of this form constitutes a certification that the information provided below is correct and complete, and that the individual(s) signing this form has/have personal knowledge of such information.

Applicant Information

Last Name: _____ First Name: _____ MI: _____
SS# (last four digits): _____ Date of Birth: _____
Street Address: _____
City: _____ State: _____ Zipcode: _____
Home Phone #: (____) _____ Driver’s License #: _____

Child Support Obligation Information

The undersigned Applicant, being duly sworn on oath or affirmation hereby states that, “To the best of my knowledge”: (place an “X” next to “A”, “B”, “C”, or “D” as is appropriate)

- ___ A. I, the Applicant, has no judicially or administratively ordered child support obligations.
- ___ B. I, the Applicant, has an outstanding judicially or administratively ordered obligation, but is paying it in accordance with the terms of the order.
- ___ C. I, the Applicant, is delinquent in paying judicially or administratively ordered child support obligations.
- ___ D. I, the Applicant, is not a Substantial Owner as defined above.

The undersigned Applicant understands that failure to disclose any judicially or administratively ordered child support debt will be grounds for revoking the privilege.

Signature: _____ Date: _____

Subscribed and sworn to before me this _____ day of _____, 20____

_____, Notary Public _____, Notary Seal

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For Internal Office Use Only: County Privilege Information

County Privilege #: _____ County Department: _____

County Requester Name: _____

County Requester Email: _____ Phone #: _____