Instructions on Applying For an Asbestos Handling License

Article 30 of the New York State Labor Law and the rules and regulations promulgated thereunder, provides that it shall be unlawful for any contractor to engage in an asbestos project unless such contractor has a valid Asbestos Handling License issued by the Commissioner of Labor.

General Information

Who needs a license? Any contractor engaged in an asbestos project.

All firms, corporations or other business entities providing management planning, project design, monitoring, inspection and/or air monitoring services shall obtain an Asbestos Handling License. (Additionally, management planners, project designers, and project monitors shall obtain an asbestos certificate appropriate to the task performed by such person.)

Note: An in-plant operation is subject to all the licensing requirements established by the code.

Application Procedure

How to obtain an application packet. An asbestos license application packet may be obtained from the NYS Department of Labor, License and Certificate Unit, Building 12 - Room 161A, State Office Campus, Albany, New York 12240; telephone (518) 457-2735. In addition, application packets may be obtained from www.labor.ny.gov

Material to be Submitted

Application An original application form with the Applicant Statement signed in ink.

Fee A non-refundable application fee of $500 for a first time license or $300.00 for a renewal license in the form of a check or money order made payable to the Commissioner of Labor.

Training A copy of the Supervisor Certificate issued by New York State to the contractor, or a supervisor designated to act as the contractor’s agent, must be submitted as evidence of successful completion of an approved asbestos safety program.

For specific information on asbestos training programs, contact the NYS Department of Health, Center for Environmental Health Asbestos Safety Training Program Flanigan Square, Room 230 547 River Street, Troy, NY 12180, (518) 402-7940.
An “Application for Certificate of Workers’ Compensation Insurance” **MUST** be filed as proof of acceptable Workers’ Compensation Insurance in New York State. The License and Certificate Unit at the address shown below should be entered in the ‘to be filed with’ and ‘change or cancellation’ sections of the form. Such certification may be obtained from the Workers’ Compensation Board district office nearest to you.

Disability Insurance is required in New York State if the applicant is a “covered employer,” i.e., if one or more of the applicant’s employees is employed in New York State for at least 30 days in any calendar year; the 30 days need not be consecutive. An applicant who is a covered employer must submit a copy of his/her Certificate of Disability Insurance (DB-120.1) or DB-155 - Certificate of Disability Benefit Self Insurance. An applicant who is not a covered employer must submit a CE 200 – Certification of Attestation of Exemption issued by the Workers’ Compensation Board.

Further information on insurance may be obtained by contacting the Workers’ Compensation Board.

### Submittal Information

All application material should be mailed to:

**New York State Department of Labor**  
License and Certificate Unit  
State Office Campus  
Building 12, Room 161A  
Albany, NY  12240

### License Information

**Expiration**  
A license is valid for one year from its date of issuance.

**Renewal**  
A license renewal application will be mailed to you approximately 60 days prior to the expiration of your current license.

**Updating Information**  
Any change to the information contained in the license application must be reported **in writing within 30 calendar days of the effective date of the change.** Such changes include (but are not limited to) changes in address, principals, ownership, designated supervisor, insurance coverage, etc. The updated license information should be submitted to the License and Certificate Unit at the address shown above.

**Replacement License**  
If an Asbestos License is lost or stolen prior to its expiration, the individual to whom it was issued may request a replacement. Submit the following to the address listed above:

- a notarized letter which includes an explanation of the loss, and a statement that the individual understands that submittal of false information shall subject the individual to penalties or other legal action.

- a non-refundable fee of $300 by check or money order, made payable to the Commissioner of Labor.