

GEORGIA LEAD-BASED PAINT APPLICATION PAYMENT VOUCHER

INSTRUCTIONS: After you have completed all sections of the application package

- Fill out the bottom section of this page and attach your check or money order for the correct amount of the application fee in the space provided.
- Make a copy of this page *with the attached check* and send it with the original application and original supporting documents to:

**EPD LEAD-BASED PAINT PROGRAM
4244 INTERNATIONAL PARKWAY, SUITE 104
ATLANTA, GEORGIA 30354**

- Make a copy of the application and supporting documents and then send along with your application fee check or money order and the original of this payment voucher to:

**EPD LEAD FEES
POST OFFICE BOX 101896
ATLANTA, GEORGIA 30392**

DO NOT SEND THE ORIGINAL OF THIS PAGE OR THE ACTUAL CHECK TO THE EPD OFFICES.

DO NOT SEND THE ORIGINAL APPLICATION PACKAGE OR ORIGINAL SUPPORTING DOCUMENTS TO THE POST OFFICE BOX ADDRESS GIVEN ABOVE.

The original application package, original supporting documents, a copy of this page, and a copy of the application fee should be sent to the EPD offices. The actual fee payment attached to the original of this page and copies of the application and supporting documents should be sent to the post office box address given above.

Application Type (Select All That Apply):

- | | | |
|---|---|--|
| <input type="checkbox"/> Lead Worker \$25.00 | <input type="checkbox"/> Combined Inspector/Risk Assessor \$250.00 | <input type="checkbox"/> Application for Notice to Proceed – Consult Schedule of Fees and Enter Amount Paid Here: \$ _____ |
| <input type="checkbox"/> Lead Supervisor \$150.00 | <input type="checkbox"/> Lead Project Designer \$150.00 | <input type="checkbox"/> Lead Firm \$350.00 |
| <input type="checkbox"/> Lead Inspector Only \$150.00 | <input type="checkbox"/> Lead Training Provider – Consult Schedule of Fees and Enter Amount Paid Here: \$ _____ | |
| <input type="checkbox"/> Lead Risk Assessor Only \$150.00 | | |

Submitted By: _____

Company Name: _____

Check Number: _____ Check Amount: _____

STAPLE YOUR CHECK OR MONEY ORDER HERE. AFTER YOU ATTACH THE CHECK HERE:

Please *do not send your check* to the Program address.

Send a copy of this page, a copy of your application fee, your original application, & original supporting documents to:

**EPD Lead-Based Paint Program
4244 International Parkway, Suite 104
Atlanta, Georgia 30354**

This page, copies of your application & supporting documents, and the actual check must be sent to:

**EPD Lead Fees
Post Office Box 101896
Atlanta, Georgia 30392**