



D&S Diversified Technologies LLP

Headmaster LLP

D&S DIVERSIFIED TECHNOLOGIES, LLP -HEADMASTER, LLP

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*Innovative, quality technology
solutions throughout
the United States since 1985.*

OHIO LEAD LICENSE EXAM

CANDIDATE PAYMENT FORM 1402CND-OL

Your application to obtain an initial Ohio lead license or to renew a current Ohio lead license must be or has been approved by the Ohio Department of Health. If you applied for an initial license and were not recognized as a reciprocity candidate, you must schedule a test appointment and pass the Ohio lead license examination in your requested lead discipline. If you applied for an initial Ohio lead license with reciprocity, or you are renewing a current lead license, you only need to have your license identification photo taken at a D&S Diversified Technologies test site by a certified test examiner.

Candidate Information:

Last Name: _____ First Name: _____

Phone #: _____ Email: _____

Social Security Number: _____ Date of Birth: _____ Signature: _____

(Unsigned payment forms will not be processed, will be shredded if a credit/debit card payment is included, or will be mailed back if a money order or cashier's check is included.)

TESTING CHOICE: Refer to the Test Schedule available on the Ohio Lead Abatement Testing and Certification web page at: www.hdmaster.com. Request a 1st and 2nd choice test date and location to take your Ohio LEAD Exam or to have your picture taken for your Ohio LEAD License Renewal/Reciprocity.

1st - Test Site #: _____ Test Date: _____ Test Site Name: _____

2nd - Test Site #: _____ Test Date: _____ Test Site Name: _____

PAYMENT INFORMATION:

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MONEY ORDER/CASHIER'S CHECK PAYMENT:

Money Order/Cashier Check Number: _____

Make money order/cashier's check payable to:

D&SDT

And mail to: P.O. Box 6609, Helena, MT 59604

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CREDIT/DEBIT CARD PAYMENT (MasterCard or VISA only):

For credit/debit card payments- EMAIL THIS FORM TO: ohlead@hdmaster.com

Card Number: _____ Expiration Date: _____ Zip Code: _____

0000-0000-0000-0000

MM/YY

Print Name as it appears on card: _____ Signature of Cardholder: _____

Exam Types and Fee Payment

CHECK ONLY ONE LEAD DISCIPLINE LICENSE EXAM OR RENEWAL/RECIPROCITY THAT APPLIES TO YOU

LEAD DISCIPLINE	LEAD TEST REQUESTED	PRICE	TOTAL	RENEWAL/RECIPROCITY REQUESTED <i>There is no fee for Renewals/Reciprocities</i>	
LEAD ABATEMENT WORKER	☐	\$75.00/CANDIDATE		Lead Abatement Worker	☐
LEAD ABATEMENT CONTRACTOR	☐	\$75.00/CANDIDATE		Lead Abatement Contractor	☐
LEAD RISK ASSESSOR	☐	\$75.00/CANDIDATE		Lead Risk Assessor	☐
LEAD INSPECTOR	☐	\$75.00/CANDIDATE		Lead Inspector	☐
LEAD CLEARANCE TECHNICIAN	☐	\$75.00/CANDIDATE		Lead Clearance Technician	☐
Knowledge Exam Add-on Option: Audio (oral) Version of the Knowledge Exam or Retake	☐	+10.00 <i>*SEE NOTE TO THE RIGHT</i>		<i>*With this add-on, you will listen to the test questions/answers with headphones/earbuds, read through the computer, and see the questions/answers on the screen to read along. The total for an Audio Version of the Knowledge Exam or Retake is \$75.00 + \$10.00 = \$85.00</i>	
Priority Fax Service: (406)442-3357 NOTE: I also authorize a \$5.00 fax fee to be charged to my credit card <u>if</u> I fax my payment form to D&SDT-Headmaster.	☐	\$5.00/CANDIDATE		Canceling a scheduled exam appointment within one business day of the exam or missing a scheduled exam appointment will result in the forfeiture of the entire exam fee. The applicant will need to apply for a new exam appointment, and a full testing fee will be required.	
PERSONAL CHECKS AND CASH ARE NOT ACCEPTED. BY SUBMITTING THIS FORM, YOU ARE RESPONSIBLE FOR THE PAYMENT OF TESTING FEES CHECKED, EVEN IF YOU ARE A NO-SHOW STATUS FOR YOUR TEST EVENT.		TOTAL:			

ADA ACCOMMODATION: If you need special accommodations under the Americans with Disabilities Act, please see the ADA Accommodation Request Form available on the Ohio Lead Licensing web page at www.hdmaster.com.

NOTE for Credit Card Payments: If payment is made by credit card and the fee is disputed, you will be charged a \$35 chargeback fee, in addition to any applicable testing fees. By signing this form, I accept the policies as stated on this form. Please call D&SDT at (877) 851-2355 if you do not receive a test confirmation email within five business days.