NEBRASKA
Good Life. Great Mission.
DEPT. OF HEALTH AND HUMAN SERVICES
Division of Public Health - Licensure Unit
PO Box 94986 - Lincoln, NE 68509-4986
402-471-2299

APPLICATION FOR REINSTATEMENT TO PRACTICE A RADON OCCUPATION

(Revoked, Expired, Placed on Inactive Status, Lapsed, or Voluntary Surrender without Disciplinary Action)

I hereby apply for reinstatement of my license to practice as a Radon Measurement Specialist or a Radon Mitigation specialist in the State of Nebraska and submit the required fee.

Prorated Fee: If your license is reinstated within 180 days of the expiration date the fee for initial licensure is **$60.**

Year	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec
Even	**$127**	**$127**	**$127**	**$127**	**$127**	**$127**	**$127**	**$127**	**$127**	**$60**	**$60**	**$60**
Odd	**$60**	**$60**	**$60**	**$127**	**$127**	**$127**	**$127**	**$127**	**$127**	**$127**	**$127**	**$127**

Make your check payable to "Licensure Unit" **All licenses expire March 31 of odd-numbered years.**

Check the type of license that you are reinstating: ☐ Radon Measurement Specialist ☐ Radon Mitigation Specialist

This Application Can Be Completed Electronically, but Must Be Signed By the Applicant

SECTION A – Personal Information – This section is public information and will be displayed on the Internet at **http://www.dhhs.ne.gov/lookup** **NOTE:** All mailings from this office will be sent to the address you indicate below – If you change your address, you must advise this office.

Legal Name:	First:	Middle/MI:	Last:
Maiden Name	Name:	Other names you are known as (AKA)	
Present Address	Street/Box/Route:		
	City:	State:	Zip:
License number to reinstate:			

Phone #: (optional)		Fax #: (optional)		E-Mail Address: (optional)	

Additional information requested: This section is **not** public information and will **not** be displayed on the internet.

Date of Birth:		Place of Birth - City, State or Country	
Check the Appropriate Box(s):	☐ Social Security Number (SSN); ☐ Alien Registration Number (A#)		SSN A#

If you have both a SSN and an A#, you must report both. Neb. Rev. Stat. § 38-123 mandates disclosure of your social security number to DHHS. Although your number is not public information, DHHS may disclose it for child support enforcement purposes and to the Nebraska Department of Revenue.

Employer Information	Employer
	Address
	City
	State/Zip
	Phone
	E-mail

SECTION B – Conviction and Licensure Information – Failure to disclose any such conviction or disciplinary action, regardless of when the action occurred, could result in disciplinary action, including, but not limited to, payment of a civil penalty**. Please answer each of the following questions with regard to the time period since your license was last renewed.** All 'yes' responses MUST be explained in detail and you must submit the requested documentation on another page.

	Yes	No
Have you ever been convicted in any jurisdiction of a misdemeanor or felony?	☐	☐

If you answered YES to the question above, you must contact the Nebraska Radon Program Office at 402-471-8320.

- **NOTE:** If you have any criminal charges or license disciplinary actions pending that results in conviction or license discipline, you must report such actions to this Department within 30 days of the conviction/action (Neb. Rev. Stat. §38-1,125)

The following questions relate to a credential(s) that you hold or have held in health services, health related services or environmental services in Nebraska or another jurisdiction.

	Yes	No
Do you hold or have you held a credential in another state? If yes, what State?	☐	☐
Has your license ever been: Denied; Refused Renewal; Limited; Suspended; Revoked; or had other disciplinary measures taken against it? If yes you must request the following documents be sent directly to this office	☐	☐

- Certification of your credential in another state; and
- Official Documents from the State Board in which the disciplinary action was taken

SECTION C – Practice Prior to Reinstatement. An individual who practices prior to reinstatement of a credential is subject to assessment of an Administrative Penalty of $10 per day up to $1,000, or such other action as provided in the statutes and regulations governing the credential.

		Yes	No
Have you practiced as a Radon Measurement Specialist or radon Mitigation Specialist in Nebraska since your license was expired, on inactive status or following voluntary surrender?		☐	☐
If yes, what is the actual number of days you practiced without a license in Nebraska and what are the business name, location and telephone number of the practice.		# of days:	
Business Name:	Address:	Phone #:	

Attestation: For the purpose of complying with Neb. Rev. Stat. §§4-108 through 4-114 and 38-129 (*check **ONE** of the boxes below):*

I attest that:

☐ I am a citizen of the United States; **OR**

☐ I am a qualified alien under the Federal Immigration and Nationality Act; **OR**

☐ I am a nonimmigrant lawfully present in the United States; **OR**

☐ Check this box if you are **NOT** a citizen of the United States, a nonimmigrant, nor a qualified alien under the Federal Immigration and Nationality Act.

NOTE: You may still be eligible for a certificate if you provide a photocopy of your unexpired Employment Authorization Document (EAD) and evidence of meeting section 202(c)(2)(B)(i) through (ix) of the Federal REAL ID Act of 2005.

If you are **NOT a citizen of the United States**, you must submit proof of lawful presence in the U.S. Your certificate will NOT be renewed until such proof is received by our office and verified through the Department of Homeland Security (may take 4-6 weeks).

Signature and Application Attestation: **I attest that:**

1. I have read the renewal application or have had the renewal application read to me; and
2. All statements on this renewal application are true and complete.

Print Name: _____

Signature: _____ Date: _____

***NOTE:** The applicant must submit the following:

1. **Age:** Evidence of at least 19 years of age (i.e.: driver's license, birth certificate, marriage license, school transcript, US State ID card, Military ID, or similar documentation);
2. **Citizenship, lawfully admitted/present information**: You must submit a copy of at least one of the following documents:

Any of the following documents to provide proof of United States Citizenship:

1) A U.S. Passport (unexpired or expired);
2) A birth certificate issued by a state, county, municipal authority or outlying possession of the United States
3) bearing an official seal;
4) An American Indian Card (I-872);
5) A Certificate of Naturalization (N-550 or N-570);
6) A Certificate of Citizenship (N-560 or N-561);
7) Certification of Report of Birth (DS-1350);
8) A Consular Report of Birth Abroad of a Citizen of the United States of America (FS-240);
9) Certification of Birth Abroad (FS-545 or DS-1350);
10) A United States Citizen Identification Card (I-197 or I-179);
11) A Northern Mariana Card (I-873);

If you are NOT a U.S. Citizen, you must submit a copy of one of the following:

If you are a Qualified Alien under the Federal Immigration and Nationality Act:

- Green Card, otherwise known as a Permanent Resident Card (Form I-551), both front and back of the card;
- An unexpired foreign passport with an unexpired Temporary I-551 stamp bearing the same name as the passport; or
- Form I-94 (Arrival-Departure Record) AND an unexpired foreign passport with a valid unexpired US visa.

If you are not a U.S. Citizen nor a Qualified Alien under the Federal Immigration and Nationality Act and are lawfully present in the United States, you may still be eligible for a license if you provide a photocopy of your unexpired Employment Authorization Document (EAD) and evidence of one of the following documents under the Federal REAL ID Act:

- Employment Authorization Card

AND

- An approved deferred action status (DACA);
- A pending application for asylum in the United States;
- A pending or approved application for temporary protected status in the United States;
- A pending application for adjustment of status to that of an alien lawfully admitted for permanent residence; or in the United States or conditional permanent resident status in the United States.

NOTE: Documents (other than those for U.S. Citizenship) are verified by our office through the Department of Homeland Security. This process may take 4-6 weeks.