



MURANAKA ENVIRONMENTAL CONSULTANTS, INC.
P.O. Box 4341 Honolulu, HI 96812. Phone: 808-845-8822, Fax 808-845-8823,
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TRAINING COURSE REGISTRATION

You may register by email, fax, or regular U.S. mail:

***** Need copy of current license/certificate for all Refresher courses*****

Course Title: _____

Course Date(s): _____

Course Price: \$ _____ / per person

***** Need to email copy of current license/certificate for all Refresher courses *****

Attendee's Name (NAME MUST MATCH DRIVER'S LICENSE)	Birth Date (required for LBP RRP class)	Last 4 digits of SS #

(Attach additional sheets if necessary.)

Contact Person: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

PAYMENT MUST BE RECEIVED PRIOR TO START OF CLASS.

Please make payment payable to: Muranaka Environmental Consultants, Inc.

Reservations are confirmed upon receipt of payment.

(Please use separate registration forms per class.)

Method of Payment: Check or Cash P.O. # Credit Card There will be a 3.4% non-refundable charge for use of credit card transactions.

**If you are paying by credit card, please complete the attached
Credit Card Authorization Form**

Conditions: The course fee will be fully refunded for cancellations received seven (7) calendar days prior to the start of the course. Cancellations received within 7 calendar days of a scheduled class will be subject to a 50% fee. Muranaka Environmental Consultants, Inc. reserves the right to cancel any course based on a minimum participation or the availability of instructors at which time all fees will be refunded. Tuition refund will not be made for attendee who took refresher course and submitted an invalid certificate from a prior course. Muranaka Environmental Consultants, Inc. shall not be responsible for travel or any other cost(s).

Proj. # / Code _____ (For Office Use Only)

***Hawaii Department of Health's Minimum Certification Requirements:**

Asbestos Inspector:

2 years of full time college education **or**, High school diploma **and** 2 years experience in engineering or industrial hygiene **or**, High school diploma **and** 1 year experience in asbestos abatement activities **AND** successful completion of an accredited 3-day INITIAL training course **and** any associated REFRESHER course(s), if applicable.

Asbestos Management Planner:

Bachelors degree in a related field & 6 months experience in abatement work **or**, Associates degree in a related field & 1 year experience in abatement work **or**, High school diploma & 3 years experience in engineering or industrial hygiene & 1 year experience in abatement work **AND** successful completion of an accredited INITIAL training course **and** any associated REFRESHER course(s) for Inspector & Management Planner, if applicable.

Asbestos Contractor/Supervisor:

At least 18 years of age; and Successful completion of an accredited 5-day INITIAL training course and any associated REFRESHER course(s), if applicable; **AND** 6 months of experience working within containment **or** three years in general construction.

Asbestos Project Monitor:

Bachelors degree & 3 abatement projects inside containment area **or**, 2 years full time college education & 1 year experience in engineering or industrial hygiene & 3 abatement projects inside containment area **or**, High school diploma & 3 years experience in engineering or industrial hygiene & 3 abatement projects inside containment area, **AND** successful completion of an accredited INITIAL training course **and** any associated REFRESHER course(s) for Project Monitor.

Asbestos Project Designer:

Status as either a Certified Industrial Hygienist, a licensed Professional Engineer, or a licensed Architect & 6 months experience in abatement projects **or**, Bachelors degree and 1 year experience in abatement projects **or**, Associates degree in a related field & 3 years experience in abatement projects **or**, High school diploma & 4 years experience in engineering or industrial hygiene & 1 year experience in abatement work, **AND** successful completion of an accredited INITIAL training course **and** any associated REFRESHER course(s) for Project Designer.

***Ensure that you review the certification requirements provided above and ensure that you qualify for the discipline you are signing up for if you intend to get certified for the discipline(s) offered through HDOH. MEC is not responsible for any rejection or issues pertaining to obtaining your certification through DOH after successfully passing the course.**



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CREDIT CARD PAYMENT AUTHORIZATION

NAME (as listed on card): _____

BILLING ADDRESS: _____

CITY _____ STATE _____ ZIP CODE _____

PHONE NO: _____

EMAIL ADDRESS: _____

VISA MASTERCARD AMEX
(Circle One)

CARD #: _____

EXPIRATION DATE: _____ CVV CODE: _____

I agree to pay the credit card charges as authorized:

Signature as on card

Date