Authorized User Confirmation Request Form Maryland Lead Rental Certification and Accreditation Database (LRCA)

An "Authorized User" is a person designated by the business owner to make changes to the business profile in the LRCA database. The Authorized User would be able to change contact information, link accredited employees, print certificates, and perform other essential business functions. Please complete this form to designate the Authorized user for your business (contractor).

Email complete form to: LRCA.MDE@Maryland.gov

Name of Accredited Contractor:

Accreditation Number of Contractor:

(An Authorized User can add additional Authorized Users, add or terminate employees from the business, and change your business profile.)

Authorized Users:

First Name:	Last Name:	Email Address:
First Name:	Last Name:	Email Address:

This Notice is provided pursuant to § 4-501 of the General Provisions Article of the Maryland Code. The personal information requested on this form is intended to be used in processing your request for an authorized user for your business account. The Maryland Department of the Environment ("MDE") will not be able to approve your request without a signature from the representative authorized to act on behalf of your business. You have the right to inspect, amend, or correct this form. MDE is a public agency and subject to the Maryland Public Information Act (Md. Code Ann., General Provisions §§ 4-101, et seq.). This form may be made available on the internet via MDE's website and is subject to inspection or copying, in whole or in part, by the public and other governmental agencies if not protected by federal or State law.

I hereby certify that the aforementioned are authorized to make changes to the contractor/business data in the Lead Rental Certification and Accreditation ("LRCA") Database profile and submit applications and amendments to the State of Maryland. Additionally, I hereby certify that I am authorized to act on behalf of the business.

Print Name:	
Title:	
Signature:	(Original Ink Signature Required)

Date: _____