



Employment Application:

Please mail your application to: 108 Case Ct, Little River, SC 29566

OR Please fax this application to: (843) 399-0080

Name: _____

Address: _____

City, State, Zip: _____

Daytime Phone #: _____

Email address: _____

Are you an Asbestos Worker or Supervisor? _____

Do you have a valid, current SC Asbestos ID Card? Yes No

License # _____ Expiration Date _____

Do you have a valid, current NC Asbestos ID Card? Yes No

License # _____ Expiration Date _____

How many year's experience do you have working with asbestos ? _____

Have you done mold remediation? Yes No If so, how many years? _____

Have you done lead abatement? Yes No If so, how many years? _____

Have you done select demo? Ye No If so, how many years? _____

Current or previous employer name: _____

Address: _____

City, State, Zip: _____

Supervisor name: _____

Phone #: _____ May we contact? _____

Do you drive? Yes No If so, do you have a clean driving record? Yes No

Do you have reliable transportation? Yes No

Date available to start: _____

Supervisors only: If you live more than 60 miles away, would you be willing to relocate within 6 months of hiring? (Please note, Rhino does not provide assistance with moving expenses)? Yes No