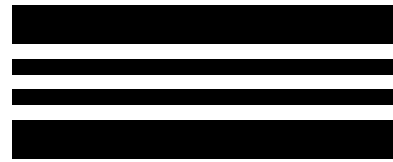


# Home Inspector Examination Application



You can use this form to apply to take the home inspector license exam. Send this completed form to:

**Home Inspectors  
Department of Licensing  
PO Box 9021  
Olympia, WA 98507-9021**



**Please include the following:**

- Copy of the Certificate of Completion of a Washington State approved Fundamentals of Home Inspection Course
- Completed Home Inspection Field Training Log

Once approved, we will send you information explaining the examination process.

### Applicant information

<b>TYPE OR PRINT</b> Legal name <i>(Last, First, Middle initial)</i>		Date of birth	
Mailing address <i>(Number, street, and suite or room number)</i>			
City		State	ZIP code
(Area code) Daytime telephone number	(Area code) Fax number	Email address	
Answer all of the following If you answer "Yes" to any of these questions, attach a letter of explanation. Include the charge, date of conviction, civil jurisdiction, state, and disposition of charges.  In this state or any other jurisdiction, are you are have you:			
1. Within the last 10 years, had any action (fine, suspension, revocation, censure, etc.) taken against any professional license, certification, or permit held by you? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No			
2. Within the last 10 years, had any civil court order, verdict, or judgment entered against you? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No			
3. Within the last 10 years, defaulted or been convicted of or entered a plea of no contest to a gross misdemeanor or felony crime? (Don't include traffic offenses) ..... <input type="checkbox"/> Yes <input type="checkbox"/> No			

*Continued on next page*

**TYPE OR PRINT** Applicant legal name *(Last, First, Middle initial)*

**TYPE OR PRINT** Supervising inspector legal name *(Last, First, Middle initial)*

**Home inspection field training**

Only one supervising inspector per page. Submit multiple pages if more than one supervising inspector.

Required for licensure: 40 hours of supervised field training and five actual inspections involving written reports within two years prior to application for examination.

Inspection date	Inspection hours	Property address

**Certification**

**Providing false information in this application may cause for the denial, suspension, or revocation of your home inspector license in the state of Washington.**

*I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

\_\_\_\_\_  
Date and place

**X**

\_\_\_\_\_  
Applicant signature

*I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

\_\_\_\_\_  
Date and place

**X**

\_\_\_\_\_  
Supervising inspector signature

\_\_\_\_\_  
Washington State home inspector license number