

Attach with paper clip two (2) passport sized color photographs of head and shoulders. Photos must be of "passport quality". Print your name on the back of the photo. Photo shall be taken within the last six months.

Application for License as Home Inspector

LA. STATE BOARD OF HOME INSPECTORS

5211 Essen Lane Suite 9
Baton Rouge, LA 70809
225.248.1334

Official use only: LOG# _____

HOME INSPECTOR LICENSING REQUIREMENTS: A home inspector's license is issued to an individual only and will not be issued to a business or corporation.

Applicant shall present evidence to the Board that they have:

- (1) satisfactorily completed at least 130 hours of required home inspection training course with a training provider approved by the Board, and
- (2) passed the Board approved licensing examination.
- (3) attended the Board approved Standards of Practice and Report Writing Seminar
- (4) obtained insurance (\$300,000 per year errors and omissions; maximum deductible \$5000 & \$300,000 per year general liability; maximum deductible \$5000)

I. PERSONAL INFORMATION:

Name: ____ Mr. ____ Ms. _____
Last Name First Name Middle or Maiden Name

Home Address: _____
Street or P.O. Box City State Zip Code

Home Phone: (____) _____ e-mail address: _____

Social Security No.: _____ Age: _____ Date of Birth: _____

Driver's License No.: _____ State Issued: _____

Name of High School or GED School: _____

City: _____ State: _____ Year Graduated: _____

Please list your residence address for the last three years if different from the address above (Attach additional pages if needed)

II. BUSINESS/EMPLOYMENT INFORMATION:

Name of business/employer: _____

Business Address: _____
Street or P.O. Box City State Zip Code

Business Phone: (____) _____ e-mail address _____

Date business established: _____ Incorporated? _____ YES _____ NO _____

III. REQUIRED EDUCATION/TRAINING:

List the Board approved provider with whom you completed the required 90 hours of classroom education:

Name: _____ Address: _____
Telephone number: (____) _____
Number of classroom credit hours received: _____ Date completed: _____

Attach copies of both LIVE and PLATFORM training forms and certificates provided by your Board approved In-field Trainer. Forms must be completed and signed by the In-field Trainer.

Attach copies of your NHIE Exam results.

Attach copy of your Certificate of Attendance for the Standards of Practice and Report Writing Seminar.

IV. LICENSES: (Attach additional pages if needed)

List all occupational and/or professional licenses which you currently hold.

Name of licensing agency: _____ Type of license: _____
License No.: _____ State: _____ Issue date: _____ Expiration date: _____
License status: _____ Active _____ Inactive _____ Expired _____ Revoked

Name of licensing agency: _____ Type of license: _____
License No.: _____ State: _____ Issue date: _____ Expiration date: _____
License status: _____ Active _____ Inactive _____ Expired _____ Revoked

V. LEGAL REQUIREMENTS:

Have you ever been denied a license or had a license suspended or revoked by an occupational or professional licensing board in Louisiana or any other State? _____ YES _____ NO

Have you ever been fined, reprimanded, or disciplined by an occupational or professional licensing board in Louisiana or any other State? _____ YES _____ NO

Are charges pending against you with any licensing board? _____ YES _____ NO

If you answered "yes" to any of the above, provide a complete written explanation, and attached a copy of the licensing board's complaint and decision.

Have you ever been charged with, convicted of or pled guilty or nolo contendere to any crime involving moral turpitude, or are such charged pending against you? _____ YES _____ NO

ALL applicants must complete and submit a Criminal Background Report (see forms at the end of the application)

VI. APPLICATION FEE:

The filing fee for this application for license as home inspector is \$200.00 and this fee must be remitted with this application. The fee is non-refundable. All requirements must be successfully met within one (1) year from the date this application is processed.

The application fee is payable only by check or money order made payable to the Louisiana State Board of Home Inspectors. Do not send cash.

Mail the completed application, the required attachments, and the application fee to the following address:

Louisiana State Board of Home Inspectors
5211 Essen Lane Suite 9
Baton Rouge LA 70809

VII. INSURANCE: ERRORS and OMISSIONS and GENERAL LIABILITY INSURANCE ARE REQUIRED.

YOUR LICENSE WILL NOT BE ISSUED UNTIL CERTIFICATES OF INSURANCE ARE RECEIVED.

_____ I WILL PROVIDE MY OWN INSURANCE POLICIES WITH THE CERTIFICATES SHOWING LIMITS OF COVERAGE AND DEDUCTIBLE SUBMITTED DIRECTLY TO THE BOARD BY THE INSURANCE CARRIER OR AGENT. I GUARANTEE THESE POLICIES ARE AND WILL REMAIN IN FORCE DURING THE ACTIVE STATUS OF MY LICENSE.

VIII. CERTIFICATION OF APPLICANT:

I, the undersigned, in making this application to the Louisiana State Board of Home Inspectors for a license as a home inspector under the provisions of the Revised Statutes of Louisiana, swear and affirm that:

I am the applicant named herein;

All of the information provided herein is true and correct to the best of my knowledge and belief;

I understand that any omission, inaccuracy, or incomplete disclosure may be deemed sufficient reason to deny licensure or to withhold renewal of my license; and could result in the suspension or revocation of my license by the Board;

I have read and subscribe to the "Standards of Practice" and the "Code of Ethics" of the Louisiana State Board of Home Inspectors, and agree that a violation of any of these rules by me is justifiable cause for revocation of my license.

I further authorize all law enforcement agencies and officials thereof to release to the Louisiana State Board of Home Inspectors any criminal history record or information pertaining to me.

Signature of Applicant

Date

NOTARY PUBLIC

Parish/County of _____ State: _____

Sworn to and subscribed before me this _____ day of _____, 20____. (AFFIX SEAL)

Printed Name of Notary Public

Signature of Notary Public

My Commission Expires

LOUISIANA STATE BOARD OF HOME INSPECTORS

LICENSE APPLICATION INSTRUCTIONS

Please type or print all information. You may use the following instructions as a checklist.

Attach two (2) recent passport size, color photos of your head and shoulders with a paper clip (do not staple) to the application form. Print your full name on the back of each photo. Photos must be of "passport" quality and taken within six (6) months of submission of your application.

Box I. PERSONAL INFORMATION:

Fill in all personal information. Licenses are only issued to individuals and not to companies or corporation(s) performing home inspection services. List all legal residential addresses for the last three (3) years, if difference from above, including your physical address, city, state and zip code (post office boxes are not an acceptable place of residence). If the address is a rental property, include the name and address of the landlord. Attach additional pages if necessary.

Box II. BUSINESS/EMPLOYMENT INFORMATION:

Fill in all business/employment information.

Box III. REQUIRED EDUCATION / TRAINING:

Fill in all information regarding your education and training and attach all applicable certificates.

Box IV. LICENSES:

List all occupational and/or professional licenses which you currently hold. Licenses may include State, Parish, County, Local Governmental Units, Trade Unions, etc. All licenses may be check for validity and status at the discretion of the LSBHI. Attach additional pages if necessary.

Box V. LEGAL REQUIREMENTS:

Fill in all portions of this section. All answers in the affirmative require a written explanation and proof of recovery and/or resolution thereof. Attach additional pages if necessary.

Box VI. APPLICATION FEE:

Mail the completed application, all required attachments and the \$200 application fee (check or money order only, NO CASH) made payable to:

LOUISIANA STATE BOARD OF HOME INSPECTORS
5211 Essen Lane Suite 9
Baton Rouge LA 70809

Box VII. INSURANCE

The Louisiana State Board of Home Inspectors must be listed as a certificate holder.

Errors and omissions insurance and general liability insurance are required. A license will not be issued until Certificates of Insurance are received by the Board.

You must include a copy of the Certificate of Insurance with the application.

Box VIII. CERTIFICATION OF APPLICANT

Read the certification. Sign the certification in the presence of a Notary Public and have your signature notarized.

APPLICATION WILL NOT BE PROCESSED WITHOUT THE FOLLOWING ATTACHMENTS:

1. Pre-licensing certificate of completion
2. Exam results
3. Live and Platform Training Certificates and or forms
4. Standards of Practice and Report Writing Seminar Certificate
5. Certificate of Insurance
6. Background Check
7. Head shot photos
8. Application fee

Background

The applicant must submit the completed forms directly to the Louisiana State Police:

1. Right to Review
2. Right to Disclosure

These forms can also be found at www.lsp.org/technical.html

Once the forms are completed the applicant can either:

1. Bring the completed forms to the LSP office (physical address below) and receive the background report that day.
2. Mail the completed forms to the LSP office (address can be found on the forms) with fingerprints and the background report will be mailed.

Fingerprinting is mandatory

The criminal background report will be signed in blue ink and sealed. The SEALED background report must be submitted to the Louisiana State Board of Home Inspectors with your application for Licensure.

If you wish for the Board to review your background report prior to beginning the licensing process, please contact the Board office at 225-248-1334

All fees are subject to change and are payable to the Louisiana State Police.

\$10.00 Fingerprint Fee

\$26.00 Processing Fee

Louisiana State Police
7919 Independence Blvd
Baton Rouge LA 70806

For Questions call the Louisiana State Police Department:
225-925-6095

ATN# _____

SID# _____

TIME F/P COMPLETED _____ TIME DESC.COMP _____

MANDATORY

\$10.00 Fingerprint Fee

\$26.00 Processing Fee

Louisiana State Police

Bureau of Criminal Identification and Information

P.O. Box 66614 (Mail Slip A-6)

Baton Rouge, LA 70896

R/R

2 SEPARATE MONEY ORDERS, CASHIER CHECKS OR BUSINESS CHECKS OR CREDIT CARD

RIGHT TO REVIEW

****Electronically Processed Fingerprints obtained by State Police after 3:30
will be available for pick up the next business day****

******FINGERPRINTS ARE NECESSARY FOR A POSITIVE IDENTIFICATION******

******PLEASE PRINT******

APPLICANTS FULL NAME:

LAST

FIRST

MIDDLE

STREET ADDRESS:

COMPLETE STREET ADDRESS TO INCLUDE APARTMENT/LOT #

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

PHONE NUMBER (____) _____

SOCIAL SECURITY NUMBER: ____ / ____ / ____ **DATE OF BIRTH:** ____ / ____ / ____

DRIVERS LICENSE OR ID NUMBER _____ **& STATE:** _____ **RACE:** _____ **SEX:** _____

APPLICANTS SIGNATURE:

AUTHORIZATION TO DISCLOSE CRIMINAL HISTORY RECORDS INFORMATION

By my signature above, I hereby authorize the Louisiana State Police to release all pertinent criminal record information maintained in their files, other states files, or the FBI files (if applicable) which may confirm or deny my eligibility with the facility or agency named above.

DPSSP 6696

**APPLICANT PROCESSING – DISCLOSURE
BUREAU OF CRIMINAL IDENTIFICATION AND
INFORMATION**

P.O. BOX 66614 (MAIL SLIP A-6)
BATON ROUGE, LA 70896
LSPAPP5/R10.03

RIGHT TO REVIEW

NAME

ADDRESS

CITY STATE ZIP CODE

DATE OF BIRTH

PLACE OF BIRTH
(STATE)

RACE / SEX

WEIGHT

HEIGHT

HAIR COLOR

EYE COLOR

SOCIAL SECURITY NUMBER

ALL INFORMATION RELEASED MUST REMAIN STRICTLY CONFIDENTIAL AND ONLY THOSE AUTHORIZED BY LAW TO RECEIVE THIS INFORMATION MAY SUBMIT A REQUEST.

DO NOT WRITE BELOW THIS LINE: {For Bureau of Criminal Identification and Information Use Only}

NOTICE: The response to your request for a criminal history check is based on a review of the State of Louisiana's criminal history records database as is available at the time of request. This does not preclude the possible existence of conviction information not available in our database.

CRIMINAL HISTORY DETERMINATION:

☐ RAPSHEET ATTACHED

☐ RESPONSE BELOW