



**STATE OF NEVADA
DEPARTMENT OF BUSINESS AND INDUSTRY
REAL ESTATE DIVISION**

788 Fairview Drive, Suite 200 * Carson City, NV 89701-5453 * (775) 687-4280
e-mail: realest@govmail.state.nv.us http://www.state.nv.us/b&i/red/

**INSPECTOR OF STRUCTURES
ORIGINAL LICENSING APPLICATION**

Section A. Type or print carefully. This section is to be completed by all candidates.

Return this application form within one year of the date shown above to the Nevada Real Estate Division office listed on this form. Enclose a check or postal money order for the appropriate fee according to the schedule below.

Resident Yes No

Date _____

Name _____
Last Name First Name Middle Initial

Home Address _____
Number and Street City State Zip Code

Mailing Address _____
Number and Street City State Zip Code

Home Phone Date of Birth Social Security Number Drivers License Number & State

Are you a member of a partnership or association? Yes No

Are you an officer of a corporation? Yes No

If you answer yes to either question, list the address of the principle office below

Business Corporation DBA

Name of Business _____

Location _____
Number and Street City State Zip Code

Mailing Address _____
Number and Street City State Zip Code

County _____ Business Telephone Number _____

Employer's SIIS Policy Number _____

Business License (Attach copy of License / County Clerk Fictitious Business Registration)

FEE SCHEDULE (NRS 645D.240)

Application	\$100.00
Issue Certification (Two Year Period)	\$250.00
Total	\$350.00

Section B All Applicants are to complete items 1-10.

1. List names used other than one given above and explain

2. Marital Status Single Married Divorced or Widowed

Spouse's Name _____

Spouse's Address _____
Number and Street City State Zip Code

3. **Occupation** List employers, past and present, for five years preceding date of application. Attach additional list if necessary

a. Occupation/Position _____

Employer/Supervisor _____ Phone _____

Address _____
Number and Street City State Zip Code

Employed from _____ to _____
Month/Year Month/Year

b. Occupation/Position _____

Employer/Supervisor _____ Phone _____

Address _____
Number and Street City State Zip Code

Employed from _____ to _____
Month/Year Month/Year

c. Occupation/Position _____

Employer/Supervisor _____ Phone _____

Address _____
Number and Street City State Zip Code

Employed from _____ to _____
Month/Year Month/Year

4. Residences for past 5 years

a. _____
Number and Street City State Zip Code

Resided from _____ to _____
Month/Year Month/Year

b. _____
Number and Street City State Zip Code

Resided from _____ to _____
Month/Year Month/Year

c. _____
Number and Street City State Zip Code

Resided from _____ to _____
Month/Year Month/Year

5. Have you been a defendant in any lawsuit or administrative proceeding, other than as a witness or plaintiff ?
 Yes No
6. Has any license issued to you by any public authority been denied, suspended or revoked? Yes No
7. Has a surety company declined to be surety on any bond written on you in the two years prior to the date of this application? Yes No
8. Has any proceeding ever been instituted by or against you under the Bankruptcy Act, or have you ever made an assignment for the benefit of creditors? Yes No
9.
 - a. Have you ever been convicted of, or are you under indictment for, or have you ever entered a plea of guilty or have you ever entered a plea of nolo contendere to a felony? Yes No
 - b. Have you ever been charged with, arrested for, or convicted of a gross misdemeanor? Yes No
 - c. Have you ever received an executive pardon? Yes No
 - d. Are you presently on parole or probation? Yes No
 - e. Have you ever been permitted to change your plea of guilty or had a criminal conviction reversed or had a judgement or verdict vacated? Yes No
 - f. Have you ever been convicted of, or are you under indictment for or have you entered a plea of guilty or nolo contendere to forgery, embezzlement, obtaining money under false pretenses, larceny, extortion, conspiracy to defraud or any crime involving moral turpitude? Yes No

If you answer "yes" to questions a through f, above, give full details, including the administrative agency, court, title of proceeding, disposition, and any other pertinent information on an attached sheet. Attach order of the court or agency which was rendered as a result of the proceedings.

Fingerprint checks will check criminal history.

EDUCATION *(listed below)* and **EXPERIENCE** (LIST ON A SEPARATE SHEET AND ATTACH)

Detail the Education and Experience that you believe will qualify you as a Certified Home Inspector.

List below the number of hours of instruction per topic that you have taken and provide transcripts / Course Completion Certificates as evidence. Please cross reference your certificates with the categories listed for ease of verification.

- | | |
|--------------------------------|------------------------------------|
| a. _____ Nevada Law (NRS 645D) | h. _____ HVAC |
| b. _____ Site (Prep/ Eval) | i. _____ Procedures |
| c. _____ Building Exterior | j. _____ Wood Destroying |
| d. _____ Building Interior | k. _____ Standards of Conduct |
| e. _____ Structural System | l. _____ Administrative Procedures |
| f. _____ Electrical | m. _____ Standards of Practice |
| g. _____ Plumbing | n. _____ Ethics |

Pursuant to Nevada Law and under the requirements of Federal Welfare Reform, the following statement **MUST BE ANSWERED AND SIGNED BELOW**. Your application for the issuance or renewal of this license will be **denied** if you do not indicate on the statement which of the provisions apply to you (initial appropriate line).

- I am not subject** to a court order for the support of a child.
- I am subject** to a court order for the support of one or more children and **AM IN COMPLIANCE WITH THAT ORDER OR A PLAN** approved by the District Attorney or other public agency enforcing the order for the repayment of the amount owed in that order.
- I am subject** to a court order for the support of one or more children and **NOT IN COMPLIANCE WITH THAT ORDER OR PLAN** approved by the District Attorney or other public agency enforcing the order for the repayment of the amount owed in that order.

Signature of Applicant

Date

I, by signing and filing this application, authorize any person or institute, to whom reference is made by me in connection with the application, to release or divulge to the Real Estate Division any information in the possession of such person or institution regarding me.

I, _____ being first duly sworn on oath, state that I am the applicant named, that I have personally prepared the foregoing application, and that the statements made by me in this application are true.

Signature of Applicant

Date

Submit \$100 Application Fee
Attach Current Photo (Mandatory)
Attach two (2) Fingerprint Cards.

Subscribed and sworn to before me, this _____ *day of* _____ *, 20* _____

Notary Stamp

Notary Public