



KENTUCKY BOARD OF HOME INSPECTORS

656 Chamberlin Avenue, Suite B

Frankfort, Kentucky 40601

(502) 564-7760

<http://bhi.ky.gov>

KBHI-1

APPLICATION FOR LICENSURE

INSTRUCTIONS

- Check the appropriate box below:
 - Initial Application**
 - Non-Resident Application:** If this box is checked, you must also complete and submit Form KBHI-8.
- All supporting material shall be submitted with a \$250 application fee. Fees are nonrefundable and must be paid by check or money order, made payable to the **Kentucky State Treasurer**.
- Include a passport quality, color photo of yourself. Do *not* staple or adhere it to the application.
- Include a Certificate of Insurance which: (i) documents liability coverage of a least Two Hundred Fifty Thousand Dollars (\$250,000); and (ii) lists the certificate holder as the Kentucky Board of Home Inspectors.
- Include the following:
 - A State Police background check from your state of residence that is less than 90 days old; AND
 - A National Criminal Investigation Check (available at <https://www.edo.cjis.gov>).
- This completed application may be submitted to the Kentucky Board of Home Inspectors by mail or delivery to 656 Chamberlin Avenue, Suite B, Frankfort, Kentucky 40601.

APPLICANT INFORMATION			
Last Name	First Name	Middle Initial	Date of Birth (mm/dd/yyyy)
Current Address			
City	County	State	Zip Code
Business Name			
Business Address (street, city, zip code)			
Cell Telephone No.		Work Telephone No.	
Personal Email		Business Email	

CRIMINAL HISTORY
<ol style="list-style-type: none"> Have you ever been convicted of, pleaded guilty under an Alford plea or <i>nolo contendere</i> to any misdemeanor or felony? <ul style="list-style-type: none"> <input type="checkbox"/> Yes <input type="checkbox"/> No Are you currently, or have you ever been, listed on a national or state registry of sex offenders? <ul style="list-style-type: none"> <input type="checkbox"/> Yes <input type="checkbox"/> No <p>NOTE: If you answered "Yes" to either question, explain fully in a signed statement on a separate sheet of paper. Include all related details such as the violation, date, and disposition. Letters from attorneys are not accepted in lieu of your statement. Falsification of this information in any way is grounds for denial of your application.</p>



KENTUCKY BOARD OF HOME INSPECTORS

656 Chamberlin Avenue, Suite B

Frankfort, Kentucky 40601

(502) 564-7760

<http://bhi.ky.gov>

KBHI-1

EDUCATION INFORMATION

Have you graduated from high school or obtained a GED? Yes No

Name of School

City and State

Diploma / GED Date

PRE-LICENSING COURSE INFORMATION

Have you completed a Board approved pre-licensing course? Yes No

Name of Provider(s)

Provider Number(s)

Date Completed

Test Score

City and State

Number of Classroom Hours

Number of In-Field Training Hours Completed

OTHER STATE LICENSURE / CERTIFICATION / REGISTRATION / PERMIT

Do you hold, or have you ever held, a license, certificate, registration, or permit to practice or perform ANY regulated profession by a state or local licensing board or commission in Kentucky or any other state? (Check the appropriate box below.)

Yes No (If "Yes", list all state or local licenses below, including those issued in Kentucky.)

Type of License, Certificate, Registration or Permit	State/local	License Number	Date Issued	Status
1.				
2.				
3.				
4.				
5.				

Check the appropriate box below. If you answer "Yes", provide complete details on a separate piece of paper.

Has disciplinary action ever been taken against you regarding any license, registration, certificate, or permit that you hold or have ever held? Yes No

STANDARDS OF PRACTICE

I will use the most current edition of the standard of practice selected below to perform home inspections.

American Society of Home Inspectors (ASHI)

Inter-National Association of Certified Home Inspectors (InterNACHI)

APPLICANT AFFIRMATION

I hereby swear or affirm, under the penalty of perjury, that the statements made in this application are true, complete and correct. I further authorize the Kentucky Board of Home Inspectors to investigate and confirm the information submitted in this application and all attachments.

Signature of Applicant

Date