



KENTUCKY BOARD OF HOME INSPECTORS

656 Chamberlin Avenue, Suite B

Frankfort, Kentucky 40601

(502) 564-7760

<http://bhi.ky.gov>

KBHI-2

APPLICATION FOR LICENSURE RENEWAL, REINSTATEMENT OR REACTIVATION

INSTRUCTIONS

- Check the appropriate box below:
 - Renewal:** If postmarked ON OR BEFORE the last day of your renewal month, check this box and submit a \$200 fee, per licensure year. (\$400 if for 2 years).
 - Late Renewal:** If postmarked from 1 to 60 days AFTER the last day of your renewal month, check this box and submit a **\$250 penalty fee** in addition to the standard renewal fee of \$200 per licensure year. (\$400 if for 2 years).
 - Reinstatement:** If postmarked from 61 to 120 days after the last day of your renewal month, check this box, and submit a **\$500 penalty fee** in addition to the standard renewal fee of \$200 per licensure year. (\$400 if for 2 years).
 - Reactivation:** \$10.00 fee.
- All supporting material shall be submitted with the appropriate 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 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 a Kentucky State Police background check that is less than 90 days old.
- 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)
Cell Telephone No.			License Number

CONTINUING EDUCATION
<ol style="list-style-type: none"> Submit copies of your certificates of completion for 14 hours of Continuing Education Credit per licensure year with this application. <ul style="list-style-type: none"> <input type="checkbox"/> I am submitting proof of 14 hours of Continuing Education Credit, including 3 hours on Kentucky Laws and 3 hours on report writing for my 1-year renewal term. <input type="checkbox"/> I am submitting proof of 28 hours of Continuing Education Credit, including 3 hours on Kentucky Laws and 3 hours on report writing for my 2-year renewal term.

STANDARDS OF PRACTICE
<p>I will use the most current edition of the standard of practice selected below to perform home inspections.</p> <ul style="list-style-type: none"> <input type="checkbox"/> American Society of Home Inspectors (ASHI) <input type="checkbox"/> Inter-National Association of Certified Home Inspectors (InterNACHI)



KENTUCKY BOARD OF HOME INSPECTORS

656 Chamberlin Avenue, Suite B

Frankfort, Kentucky 40601

(502) 564-7760

<http://bhi.ky.gov>

KBHI-2

OTHER STATE LICENSURE / CERTIFICATION / REGISTRATION / PERMIT

OTHER THAN YOUR KENTUCKY BOARD OF HOME INSPECTORS LICENSE, 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.				

Please check the appropriate boxes below. If you answer "Yes" to either question, 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
- Since your initial application, or your most recent renewal application, have you been convicted of, pleaded guilty under an Alford plea, or pleaded *nolo contendere* to any misdemeanor or felony?
 Yes No

HOME INSPECTION REPORT

I am submitting a copy of a complete home inspection that I have performed within the last 12 months, including proof of compensation.

Client Name	Client Phone	Date of Inspection
Property Address		

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
------------------------	------