## **KENTUCKY BOARD OF HOME INSPECTORS**



500 Mero Street 2NE09 Frankfort, Kentucky 40601 (502) 564-7760 <a href="http://bhi.ky.gov">http://bhi.ky.gov</a> KBHI-2

## APPLICATION FOR LICENSURE RENEWAL, REINSTATEMENT OR REACTIVATION UCTIONS

| INZIK   | JCHONS  |          |                                    |  |  |  |  |  |
|---|---|----------|------------------------------------|--|--|--|--|--|
| 1.  | Check the appropriate box below:  |          |                                    |  |  |  |  |  |
|   | ☐ Renewal: If postmarked ON OR BEFORE the last day of your re   | enewal   | 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 las   | st day o | f your renewal month, check this   |  |  |  |  |  |
|   | box and submit a \$250 penalty fee in addition to the standard re   |          |                                    |  |  |  |  |  |
|   | (\$400 if for 2 years).   |          | ·                                  |  |  |  |  |  |
|   | ☐ Reinstatement: If postmarked from 61 to 120 days after the I  | ast day  | of your renewal month, check this  |  |  |  |  |  |
|   | box, and submit a <b>\$500 penalty fee</b> <i>in addition</i> to the standard renewal fee of \$200 per licensure year.  |          |                                    |  |  |  |  |  |
|   | (\$400 if for 2 years).   |          |                                    |  |  |  |  |  |
|   | ☐ <b>Reactivation</b> : \$10.00 fee.  |          |                                    |  |  |  |  |  |
| 2.  |   |          |                                    |  |  |  |  |  |
|   | and must be paid by check or money order, made payable to the <b>Kentucky State Treasurer</b> .   |          |                                    |  |  |  |  |  |
| 3.  |   |          |                                    |  |  |  |  |  |
| 4.  |   |          |                                    |  |  |  |  |  |
|   | Thousand Dollars (\$250,000); and (ii) lists the certificate holder as the Kentucky Board of Home Inspectors.   |          |                                    |  |  |  |  |  |
| 5.  |   |          |                                    |  |  |  |  |  |
| 6.  | 6. This completed application may be submitted to the Kentucky Board of Home Inspectors by mail or  |          |                                    |  |  |  |  |  |
|   | delivery to 500 Mero Street 2NE09, Frankfort, Kentucky 40601.   |          |                                    |  |  |  |  |  |
|   |   |          |                                    |  |  |  |  |  |
| APPLICANT INFORMATION   |   |          |                                    |  |  |  |  |  |
| Last Na   | me First Name Middle Ini  | itial    | Date of Birth (mm/dd/yyyy)         |  |  |  |  |  |
|   |   |          |                                    |  |  |  |  |  |
| Cell Telephone No.  |   |          | License Number                     |  |  |  |  |  |
|   |   |          |                                    |  |  |  |  |  |
|   | CONTINUING FOUCATION  |          |                                    |  |  |  |  |  |
| 1   | CONTINUING EDUCATION  Submit copies of your cortificator of completion for 14 hours of 6  | Continu  | ing Education Cradit par licensure |  |  |  |  |  |
| 1.  | 1. Submit copies of your certificates of completion for 14 hours of Continuing Education Credit per licensure   |          |                                    |  |  |  |  |  |
|   | year with this application.   |          |                                    |  |  |  |  |  |
|   | $\square$ 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.   |          |                                    |  |  |  |  |  |
|   | □ Long submitting musef of 20 hours of Continuing Education Condit including 2 hours on Keyland Land  |          |                                    |  |  |  |  |  |
|   | $\Box$ 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. |          |                                    |  |  |  |  |  |
|   | and 3 hours of report writing for my 2-year renewarterm.  |          |                                    |  |  |  |  |  |
| 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)  |   |          |                                    |  |  |  |  |  |
|   |   |          |                                    |  |  |  |  |  |
| ☐ Inte  | r-National Association of Certified Home Inspectors (InterNACHI)  |          |                                    |  |  |  |  |  |
|   | ,   |          |                                    |  |  |  |  |  |

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| 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 t  | o practice or perfo | m ANY regulated prof | fession 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   | State/local         | License Number       | Date Issued          | Status   |  |  |  |  |
| or Permit  |                     |                      |                      |          |  |  |  |  |
| 1.   |                     |                      |                      |          |  |  |  |  |
| 2.   |                     |                      |                      |          |  |  |  |  |
| 3.   |                     |                      |                      |          |  |  |  |  |
| 4.   |                     |                      |                      |          |  |  |  |  |
| 5.   |                     |                      |                      |          |  |  |  |  |
| Please check the appropriate boxes below. If you answer "Yes" to either question, provide complete details on a  |                     |                      |                      |          |  |  |  |  |
| <ul> <li>separate piece of paper.</li> <li>1. Has disciplinary action ever been taken against you regarding any license, registration, certificate, or permit that you hold or have ever held?  ☐ Yes ☐ No</li> <li>2. 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</li> </ul> |                     |                      |                      |          |  |  |  |  |
| 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)   |                     |                      |                      |          |  |  |  |  |
|  |                     | U. D.C.D.O.D.T.      |                      |          |  |  |  |  |
|  | HOME INSPECTION     |                      | l: .l. l .40         | . 1      |  |  |  |  |
| ☐ I am submitting a copy of a complete home inspection that I have performed within the last 12 months,  |                     |                      |                      |          |  |  |  |  |
| including proof of compensation.   | CI: I DI            |                      | 15. (1               |          |  |  |  |  |
| Client Name  | Client Phone        |                      | Date of Ins          | pection  |  |  |  |  |
|  |                     |                      |                      |          |  |  |  |  |
| 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 a  | nu all attachments. |                      |                      |          |  |  |  |  |
| Signature of Applicant   |                     | Date                 |                      |          |  |  |  |  |

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