



STATE OF ALASKA
DEPARTMENT OF COMMERCE, COMMUNITY, AND ECONOMIC DEVELOPMENT
HOME INSPECTOR SECTION
333 WILLOUGHBY AVENUE, 9TH FLOOR
P.O. BOX 110806
JUNEAU, AK 99811-0806
(907) 465-5470
E-mail: license@alaska.gov

ASSOCIATE HOME INSPECTOR APPLICATION PACKET

AS 08.18.011 states, in part, that an individual may not perform a home inspection for an existing home or a new home unless that individual is registered as a home inspector or an associate home inspector with the Department of Commerce, Community, and Economic Development.

NOTE: It is unlawful to practice as a Home Inspector or an Associate Home Inspector on or after July 1, 2004, unless registered by the department or exempt under AS 08.18.156.

Following are the requirements to obtain an Associate Home Inspector Registration in the State of Alaska:

1. You will need to designate the type of home inspection registration you are applying for. Below is a brief definition of each category:
 - Existing Home Registration** allows you to perform home inspections of previously occupied homes only.
 - New Home Registration** allows you to perform home inspections of new homes (have not previously been occupied) only.
 - Joint Registration** allows you to perform home inspections of new and existing homes.
2. A complete, notarized application on a form provided by the department.
3. The appropriate fees (make check or money order payable to the "State of Alaska"):
 - \$ 50.00 Nonrefundable Application Fee
 - \$ 200.00 Registration Fee
4. A Notarized Employer Statement of Liability form (08-4046a) provided by the department, completed by the registered Home Inspector who will be supervising you. This supervisor must hold a current registration in Alaska as a Home Inspector and must be registered in the same category of home inspection for which you are applying.

GENERAL INFORMATION

WARNING

Alaska Statute 11.56.200 states that any person who knowingly or intentionally furnishes false or fraudulent information on an application has committed a class A misdemeanor. Any false or misleading information may result in failure to obtain registration as a home inspector or subsequent revocation of that registration.

RENEWAL

Registration will expire biennially on June 30 of even-numbered years. Renewal notices are mailed approximately 60 days prior to the license expiration. It is the licensee's responsibility to ensure renewal of the license. Please contact the division if you have a change of address. Failure to receive a renewal notice does not excuse nonrenewal.

CHANGE OF ADDRESS

A licensee is required to notify this division of any change in mailing address (12 AAC 02.900).

SOCIAL SECURITY NUMBER REQUIREMENT

In accordance with AS 08.01.060, the department is not authorized to issue a license to a natural person unless the applicant's Social Security Number has been provided to the department. If you are a foreign citizen unable to obtain a United States Social Security Number, please contact the division for further instructions.

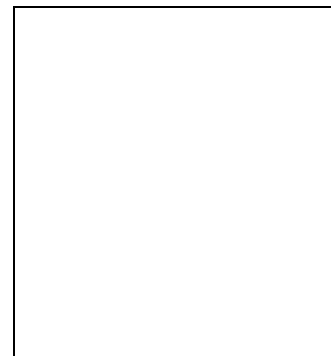
PAYMENT OF CHILD SUPPORT

Alaska Statute 25.27.244 requires the Division of Occupational Licensing to deny issuance of the professional licenses of any person reported by the Alaska Child Support Services Division (CSSD) as not in substantial compliance with a child support order.

If this office is notified by the CSSD that you are not in substantial compliance with a child support order you may be issued a nonrenewable, temporary license valid for 150 days. The 150-day temporary license period is your opportunity to work with CSSD to obtain a release. If you have questions regarding the status of your child support obligation, you may contact CSSD at 1-800-478-3300 or (907) 269-6949 to resolve payment issues.



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ASSOCIATE HOME INSPECTOR
APPLICATION FOR REGISTRATION

SECTION I
(To be completed by Associate)

Requesting registration to inspect: (MUST CHECK ONE)

- O New Homes O Existing Homes O Both (Joint Registration)

- O \$ 50.00 Nonrefundable Application Fee
O \$200.00 Registration Fee

Enclose a check or money order,
payable to the "State of Alaska"

Name: _____

Mailing Address: _____
Street Address or P.O. Box

City

State

Zip Code

Telephone Number: Day: _____ Evening: _____

Social Security Number: _____ Date of Birth: _____
(Required by AS 08.01.060) Month/Day/Year

Name of employer that will be supervising you: _____

Employer's Alaska Home Inspector registration No.: _____ Expiration Date: _____

- Employer registered to inspect: O New Homes O Existing Homes O Both (Joint Registration)

Employer address: _____
Street Address or P.O. Box

City

State

Zip Code

Please answer the following:

YES NO

- 1. Within the seven years preceding the date of this application, have you been sentenced for an offense related to forgery, theft in the first or second degree, extortion, or defrauding creditors or for a felony involving dishonesty (AS 08.18.022(4))? O O
- 2. Have you ever had the authority to perform home inspections revoked in this state or in another jurisdiction (AS 08.18.022(5))? O O
- 3. Are you the subject of an unresolved criminal complaint or unresolved disciplinary action before a regulatory authority in this state or in another jurisdiction related to real estate or home inspection matters (AS 08.18.022(6))? O O

If you answered "YES" to any of the above questions, please explain dates and circumstances on a separate piece of paper, and send any supporting documents that are applicable (court records, etc.).

CONFIDENTIALITY

The contents of licensing files are generally considered public records. If you believe that the additional information you are attaching to explain a "yes" answer should be considered confidential, state that in the attachment. A request for confidentiality may or may not be granted.

I hereby certify under oath that the information contained on this application is true and complete to the best of my knowledge. I understand that any false or misleading information may result in failure to obtain licensure or subsequent revocation of my license.

Signature of Applicant

Date

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20 _____.

(NOTARY SEAL)

Notary Public

My Commission Expires: _____

WARNING: Pursuant to 12 AAC 60.050 the board may deny approval to sit for the licensing examinations, or revoke a license granted on the basis of false or misleading statements, whether made knowingly or not. An applicant may also be subject to criminal charges for perjury (AS 11.56.200).



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EMPLOYER STATEMENT OF LIABILITY
For an Associate Home Inspector
SECTION II
(To be completed by Employer)

NOTE: This form must be completed and signed by the registered Home Inspector who will be providing the Employment/Supervision of the Associate Home Inspector.

Name of Employer/Supervisor: _____

Mailing Address: _____
 Street Address or P.O. Box

_____ City State Zip Code

Telephone Number: Day: _____ Evening: _____

I possess a current, unrestricted Alaska registration to perform Home Inspections on:

- New Homes Existing Homes Both (Joint Registration)

Alaska Home Inspector Registration No.: _____ Expiration Date: _____

I will be serving in the capacity of supervisor and employer of _____
 Name of Associate

and will provide supervision of this Associate Home Inspector's work within the scope of practice authorized by my registration. I acknowledge that I am liable for the work done by the Associate Home Inspector.

I hereby certify under penalty of perjury that the above information is true and correct.

 Signature of Employer/Supervisor

 Date

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20 _____.

(NOTARY SEAL)

 Notary Public

My Commission Expires: _____

Two witnesses' signatures required if notary is not available:

 Witness Signature _____
 Printed Name _____
 Date

Mailing Address: _____

 Witness Signature _____
 Printed Name _____
 Date

Mailing Address: _____