

FOR OFFICE USE ONLY

APPROVED

DENIED

Contact Hours: _____

Date of Approval: _____

State of Alaska
Alaska Department of Commerce, Community, and Economic
Development
Division of Corporations, Business and Professional Licensing
Construction Contractor Section
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(907) 465-5470
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Website: www.commerce.state.ak.us/occ/phin.htm

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**HOME INSPECTOR
CONTINUING COMPETENCY
APPROVAL APPLICATION**

Course Title: _____

Location and known dates of course: _____

Sponsor: _____

Sponsor Mailing Address: _____

Sponsor Contact Name: _____ Contact Telephone: _____

Attendee Name and Address (if applicable): _____

Number of Contact Hours Requested: _____

How does this course contribute directly to the professional competency of home inspector, relating to the skills and knowledge required to work as a home inspector (required by 12 AAC 22.310)?

The following must be attached before this application will be considered:

- Detailed outline, which provides content, and clearly breaks down the amount of time spent on each portion of the course.
- Copy of certificate of completion.
- Attendance record form sign-in sheet (i.e., how will attendance be verified?).

Signature of Applicant: _____ Date: _____