PLEASE READ CAREFULLY PRIOR TO SUBMITTING AN APPLICATION

Home Inspector Initial Registration Information

I. Required Materials
   A. Application Forms: A properly and fully completed application for initial registration or renewal must be submitted to the Board office on a form prescribed by the Board (attached).
   B. Application Fees: The required registration or registration renewal fee as specified in Section 204 of the Arkansas Home Inspector Registration Board Rules and Procedures shall accompany the application in the form of a check or money order. Applications received without the appropriate fee may be returned without action.
   C. Liability Insurance
      1. Coverage: All registered home inspectors must maintain current general liability insurance in the amount of at least one hundred thousand dollars ($100,000.00) issued by an insurance company licensed, or surplus lines approved, to do business in the state of Arkansas.
      2. An original certificate of insurance must be delivered or mailed to the Board office (fax or electronic copies are not permitted) which reflects that the applicant, or registered home inspector, has procured the required general liability insurance. The certificate must include the following information:
         a. Name and address of the insured individual home inspector (not just his or her company or employer).
         b. Name of the insured’s agent, agency, business address, and telephone number.
         c. Name of the firm providing the insurance (the carrier).
         d. Amount of each type of coverage being provided.
         e. The insurance policy number.
         f. The “Arkansas Home Inspector Registration Board, P.O. Box 251911, Little Rock, AR 72225” must be named as the certificate holder.
         g. The beginning and ending dates of the coverage.
         h. Signature of the issuing agent.
   D. Pre-Registration Education Certificate:
      1. Requirements: The first-time applicant shall submit documents with the application attesting to the successful passage of a Board approved comprehensive pre-registration home inspector education curriculum consisting of no less than eighty (80) hours of classroom/on-site instruction taken within the 12 months preceding the date of receipt of their completed application for registration, and where all course modules or topics are taken during one continuous period.
      2. Information for approved providers can be found at: http://www.ahib.org/Training.php
E. Competency Examinations: The first-time applicant shall submit documents with the application attesting to the successful passage of the following examinations, which must be taken in person at a facility designated by each of the organizations providing the examinations:

1. The current version of the National Home Inspector Examination (NHIE) as provided by the Examination Board of Professional Home Inspectors, Inc. (http://homeinspectionexam.org); and
2. The current version of the Standards and Ethics Examination as provided by the American Society of Home Inspectors® (http://ashi.com).

To ensure initial registration, you must attend a home inspector training school approved by the board with a curriculum of a minimum of 80 hours of classroom training. Failure to meet this or any other requirement is likely to cause a delay or denial of registration.

The board MAY approve applicants who do not meet all of the requirements and qualifications by resolution of the Board. However, detailed records and an explanation of that action must be made part of that person’s registration records. The Board reserves the right to hold for a reasonable length of time for investigation, the application of any applicant before approving an initial or renewal registration. (301.I)

If you are submitting an application requesting an exemption please provide a letter and any supporting information in your registration packet to expedite consideration of the application for approval.
Additional Information of Interest

Please read the Arkansas law regulating the practice of home inspections in Arkansas. You can access this law at http://www.ahib.org/pdfs/ArkansasCode.pdf

Please read the Arkansas Standards Of Practice, Code Of Ethics, and Report Requirements. This information can be found in section 400 of AHIB rules at http://www.ahib.org/rules.pdf

After these steps are completed, complete the registration application and have it notarized and mail it to the board along with the required items (repeated here for clarity):

- Pre-registration Education Certificate from an Arkansas Home Inspector Registration Board Approved Educator
- Certificate of Insurance.
- Certified true copies of documents showing you have successfully completed both parts of the competency examination.
- A check or money order for the registration fee. Per the rules effective January 1, 2015, that registration fee is $250.00 per year. However, for applications received between July 1 and December 31, the fee is $375. That registers you for the balance of the year plus the following calendar year. Please note that this fee is non-refundable
- A detailed letter explaining any exemption sought as well as any supporting information available

Failure to provide all required documents and information will delay your registration.

This is intended to be an outline for the most typical type of application packet the Board receives. For further information on initial inspector registration and exemptions please read section 300 of the AHIB rules and procedures at http://www.ahib.org/rules.pdf
Application for Initial Registration as a Home Inspector

APPLICANT DATE: (Note: Only individuals may register, not corporations or other legal entities.)

(1) Legal Name of Applicant:

Last Name:_____________________________First Name:__________________________Middle Name_______________________

(2) Familiar Name (To Appear on License and Website)

Last Name:_____________________________First Name:________________________Middle Name/Initial____________________

(3) Date of Birth: Month ______ Day _____ Year ________ (4) Social Security Number ______-_______-_______

(5) Company Name:

________________________________________________________________________________________

(6) Business Mailing Address:

___________________________City: ________________________ State: ______ Zip: ______

(7) Physical Home Address:

_____________________________City: ________________________ State: ______ Zip: ______

(8) Business Phone: (          ) ______________________________ (9) FAX: (          ) ______________________________

(10) Email Address: ____________________________________________@_____________________

(11) Website Address: www.________________________________________________

(12) Current employer other than your inspection company or last employer if unemployed:

Position/Profession at above: __________________________________________________________

Mailing Address: __________________________________________________________

City: ________________________ State: ______ Zip: ______

Number of years: ______ Reason for leaving: ___________________________________________________________

(13) Have you ever been convicted of a felony or a misdemeanor (other than traffic related) or plead nolo contendere, or no contest, to such charges? □ Yes □ No

If yes, give a summary of the circumstances in Item 22 below or attach additional documents.

(A criminal background check will be performed prior to licensure regardless of answer to #13. The Board may request court documents to document fulfillment of sentence if convictions appear on background check.)

(14) Are you a citizen of the United States? □ Yes □ No If not, are you a legal alien? □ Yes □ No

(15) Have you been, or are you now, licensed as a home inspector in another state?

State: _______ License number: ___________________ Expiration Date: _________________

State: _______ License number: ___________________ Expiration Date: _________________

(16) Do you currently hold, or have you ever held any type of professional license issued by the State of Arkansas? □ Yes □ No

Type of license: ____________________________ License number: ______________________ Dates held: ______To______

Type of license: ____________________________ License number: ______________________ Dates held: ______To______

Type of license: ____________________________ License number: ______________________ Dates held: ______To______

Type of license: ____________________________ License number: ______________________ Dates held: ______To______

Type of license: ____________________________ License number: ______________________ Dates held: ______To______

AHIB Form AP-1 October, 2016
(17) Have you ever had a professional license of any kind suspended, canceled, or revoked?  
(if yes, give a summary of the detail in Item 22 below.)

☐ Yes  ☐ No

(18) I certify that I have read and agree to comply with the current version of the following:

- Including the Arkansas Standards of Practice & Code of Ethics

(19) I certify that I have graduated from the following State-accredited high school ____________________________________________
in (city)_________________________, (state)__________ in (year)__________________ OR that I have provided a copy of my GED issued by a State accredited institution.

(20) List the top six counties in Arkansas where you prefer to work.  Do not make statements such as “and surrounding counties.”

Carefully check all spelling. This information is needed in order for the public to locate home inspectors in a particular area on the Board’s Internet site. At the current time, the database is limited to six (6) counties.

1. ___________________ 2. ___________________ 3. ___________________ 4. ___________________ 5. ___________________ 6. ___________________

(21) Have you resided in another state in the last 15 years?  
(if yes, please provide a background check for any state that you have resided in.)

☐ Yes  ☐ No

(22) Explanation of an item above:  (Attach additional pages if necessary.)

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I swear and affirm that the information provided above is complete and true. I understand that I am subject to the Perjury laws of the State of Arkansas. I consent to having a criminal background check performed.

________________________________________________________
Signature of Applicant

Apply Notary Seal below

AFFIDAVIT:

State of __________________________ County of __________________________

Subscribed and sworn to before me, a Notary Public,

this __________ day of ________________________________, ________

My commission expires: ________________________________

Printed Name of Notary Public: ________________________________

Signature of Notary Public: ________________________________