

Department of State Division of Licensing Services P.O. Box 22001 Albany, NY 12201-2001

New York State

Customer Service: (518) 474-4429 https://dos.ny.gov

### Home Inspector License Application

Read the instructions carefully before completing the application. Incomplete applications will be returned, delaying licensure. Any omission, inaccuracy or failure to make full disclosure in an application or supporting documentation may be deemed sufficient reason to deny a license, or, if a license is issued could result in the suspension or revocation of a license.

#### What is a Home Inspector?

New York State law Article 12-B §444-B(4) of the Real Property Law defines a Home Inspector as any person licensed to do home inspections.

#### What are Home Inspections?

New York State law Article 12-B §444-B(5) of the Real Property Law defines a home inspection as the process by which a home inspector observes and provides a written report of the systems and components of a residential building including but not limited to:

- A. Heating System
- B. Cooling System
- C. Plumbing System
- D. Electrical System
- E. Structural Components foundation, roof masonry structure, exterior and interior components or any other related residential building component recommended by the Home Inspection Council and implemented by the Department through the regulatory process.

#### Who is excluded from this law?

Explicitly excluded are Architects, Professional Engineers, and Certified Code Enforcement Officers. Whether new to the field or existing, they can continue engaging in home inspections without need of this license provided they are working within the scope of their profession. However, if they open a home inspection business they will be required to obtain a license.

# What qualifications does a Licensed Architect or a Professional Engineer opening his/her own home inspection business need to meet?

An individual who is a Licensed Architect or a Professional Engineer will need to provide proof of their professional license along with the completed application and fee. They will be exempt from the course work, examination requirements and the continuing education requirements as set forth in statute for a home inspector license.

#### Is there a liability insurance requirement?

Yes, §444-K(1) of The Home Inspection Professional Licensing Act requires that every licensed home inspector who is engaged in home inspection shall secure and maintain general liability coverage which

shall be a minimum amount of \$150,000 per occurrence and \$500,000 aggregate.

Pursuant to §197-1.1 proof of liability coverage shall include the following information: Name of insured (the applicant's name only if applying as an individual or the applicant's and AND the business name if applying as a business entity); Name of insurance company, Business address and telephone number of insurance company; Policy number; Policy expiration date and the Secretary of State as certificate holder.

Proof of liability coverage must be available for review upon request.

## Can one obtain a Home Inspector's License based on licensure in another state?

Yes, if NYS has entered into a reciprocity agreement with another state. Upon submission of an application and fee, we will review application requests from individuals submitting proof of current licensure from another state where requirements are equivalent to NYS. Where found equivalent, education and exam requirements will be waived, and a license issued.

#### What are the fees, terms of licensure?

**Application Fee:** Each application must be accompanied by a nonrefundable application fee of \$250; the license will be effective for 2 years.

**Renewal Fee:** The renewal fee is \$100 for a two year term.

## What qualifications and supporting documents do I need to apply for licensure?

You can apply based on the following:

- a. Have successfully completed high school or its equivalent;
- b. Education: Taken and successfully completed a course of study of not less than 140 hours approved by the Department. Of those hours, 40 must be unpaid field based inspections in the presence of and under direct supervision of a Home Inspector licensed by NYS, or a professional engineer or architect, regulated by NYS.

OR

**Experience:** Have performed not less than 100 home inspections (paid or unpaid) in the presence of and under the direct supervision of a Home Inspector licensed by NYS, or a professional engineer or architect regulated by NYS;

- c. Successful Completion of an Exam: Have passed the NYS
   Home Inspector Licensing Examination or the National
   Home Inspector Examination;
- d. Freedom from Disqualifying Criminal Convictions;
- e. **Application Fee:** Each application must be accompanied by a nonrefundable application fee of \$250; the license will be effective for 2 years.

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### What forms of payment do you accept?

You may pay by check or money order made payable to the Department of State or charge any fee to MasterCard or Visa, using a credit card authorization form. Do not send cash. Application fees are nonrefundable. A \$20 fee will be charged for any check returned by your bank. (Applicants should understand that if the application filing fee is paid with a personal check, and the check is returned by the bank due to insufficient funds, the next step in the licensure process will be delayed until the fee [includes \$20 returned check charge] is paid.)

### What is the renewal fee and how does one renew their license?

The renewal application is mailed to the Home Inspector approximately 3 months prior to the expiration of his or her license. The application must be completed and submitted with a \$100 fee to the Department of State, Division of Licensing Services. Instructions for proper submission will be included with the renewal application. The term of licensure is 2 years.

#### Are there any continuing education requirements?

Yes. Home inspectors are required to complete 24 hours of approved continuing education within their two-year license renewal period prior to the expiration date in order to renew their license.

### **Child Support Statement**

A Child Support Statement is mandatory in New York State (General Obligations Law) regardless of whether or not you have children or any support obligation. Any person who is four months or more in arrears in child support may be subject to having his or her business, professional and driver's licenses suspended. The intentional submission of a false written statement for the purpose of frustrating or defeating the lawful enforcement of support obligation is punishable under §175.35 of the Penal Law. It is a class E felony to offer a false instrument for filing with state or local government with the intent to defraud.

### **PRIVACY NOTIFICATION**

### Do I need to provide my Social Security and Federal ID numbers on the application?

Yes, if you have a social security number or Federal ID number, you are required to provide this number. If you do not have a social security number or Federal ID number, please provide a written explanation.

The Department of State is required to collect the federal Social Security and Employer Identification numbers of all licensees. The authority to request and maintain such personal information is found in §5 of the Tax Law and §3-503 of the General Obligations Law. Disclosure by you is mandatory. The information is collected to enable the Department of Taxation and Finance to identify individuals, businesses and others who have been delinquent in filing tax returns or may have underestimated their tax liabilities and to generally identify persons affected by the taxes administered by the Commissioner of Taxation and Finance. It will be used for tax administration purposes and any other purpose authorized by the Tax Law and may also be used by child support enforcement agencies or their authorized representatives of this or other states established pursuant to Title IV-D of the Social Security Act, to establish, modify or enforce an order of support, but will not be available to the public. A written explation is required where no number is provided. This information will be maintained in the Licensing Information System by the Director of Administration and Management at One Commerce Plaza, 99 Washington Avenue, Albany, NY 12231-0001.

### WOULD YOU LIKE TO REGISTER TO VOTE?

Please visit the NY State Board of Elections at <a href="www.elections.ny.gov/votingregister.html">www.elections.ny.gov/votingregister.html</a> or call **1-800-FOR-VOTE** to request a NYS Voter Registration form.

To register online, please visit www.ny.gov/services/register-vote.

It is important that you notify this office of any changes to your mailing address so you can receive renewal notices and any other notifications pertinent to your license.

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FOR OFFICE USE ONLY **UNIQUE ID**  **CLASS** 

**CASH NUMBER** 

QUAL CODE

FEE

\$250



New York State **Department of State Division of Licensing Services** 

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<b>Home Inspector Application</b>				
PLEASE PRINT OR TYPE ALL RESPONSE	S IN INK. Illegible applica	ations will be returned fo	r clarification, causing o	delays in licensure.
I am applying: (check one)  As the principal/owner/partne I affirm the below business is filed to  Office of the County Clerk		I affirm th	the principal/member the below business is f Division of Corporation	iled with the
Trade Name (complete Sections A (conducts business as a sole proprieto as a name other than his or her own n	rship, doing business	Limited Liability Company or Limited Partnership (complete Sections A and B) (conducts business under a limited liability company, limited partnership or assumed name)		
Partnership (complete Sections A a (conducts business under the partners			n (complete Sections siness under the corpo	A and B) rate name or assumed name
	l am appl	OR ying as an: mplete Section A) ness using his or her pers	sonal name only)	
Section A Applicant's Name:	APPLICANT I	NFORMATION		
Last	First			M.I. Suff.
Residence Street Address (Required)		P.O. Box (	mailing purposes only	/) Apt. Number
City	State	Zip+4	ı	County
Date of Birth	Social Security Number	(See Privacy Notification)	Federal Taxpayer	ID (See Privacy Notification)
E-mail Address (If any)		Daytime Te	elephone Number ( <i>If pr</i>	oblem with application)
Section B Home Inspector Business Name (If a	BUSINESS IN			
Mailing Address - Please complete this so residence address.	ection if you want you	r information to be n	nailed to an address	s other than your
Business Name				
Street Address				
City	Ctata	71		County
City	State State	Zip+4	•	County

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	BACKGROUND DATA	YES or NO	
	(Answer the following questions by checking either "YES" or "NO")  All applicants must complete this section. If you do not complete it, your application will be returned.		
	1. Do you have a high school diploma or its equivalent?		
	2. Have you ever held a home inspector license issued by the State of New York?  → IF "YES," what year? Unique ID No		
	3. Do you hold a valid home inspector's license in another state?  → IF "YES," which state?		
	4. Have you ever been convicted of a crime that is a misdemeanor or a felony?		
	→ IF "YES," you must submit a written explanation and provide a copy of the court records detailing the allegations of the offense and how the case was resolved. If you have received a Certificate of Relief from Disabilities, Certificate of Good Conduct or Executive Pardon, you must submit a copy with this application.		
	5. Are there any criminal charges (misdemeanors or felonies) pending against you in any court?		
	→ IF "YES," you must submit a written explanation and provide a copy of the court records detailing the allegations of the offense.		
	6. Has any license or permit issued to you or a company in which you are or were a principal ever been revoked, suspended or denied?		
	→ IF "YES," you must provide all relevant documents, including the agency determination, if any.		
	training.  If 40 hours of unpaid field-based training was obtained from other than an approved school you must also subtained  Must provide evidence of passing the NYS Home Inspector Licensing Examination or the National Home Inspector  OR  Experience  Must submit evidence of having performed not less than 100 home inspections (paid or unpaid) in the presen supervision of a Home Inspector licensed by NYS, or a professional engineer or architect regulated by NYS.  ATTACHMENT B.  AND  Must provide evidence of passing the NYS Home Inspector Licensing Examination or the National Home Inspector Licensed Architect or Professional Engineer	pector Examination.  ce of and under the direct You must submit	
3.	Must submit copy of license.  LIABILITY COVERAGE AFFIRMATION	0.000	
	I hereby affirm, the General Liability insurance coverage in the minimum amount of \$150,000 per occurrence and \$500 In §444-K(1) of the Home inspection Professional Licensing Act, has been secured and will be maintained.	u,uuu aggregate, as presci	nped
1.	CHILD SUPPORT STATEMENT  By signing this application, I certify that as of the date of this application, I am not under an obligation to pay child su obligation to pay child support, I am not four or more months in arrears in the payment of child support, or I am making execution or by court agreed payment or repayment plan or by plan agreed to by the parties or my child support obligation to pay child support obligation or I am receiving public assistance or supplemental security income.	payments by income	
5.	APPLICANT AFFIRMATION - I affirm that I have read and understand the provisions of Article12-B of the Real Pr and regulations promulgated thereunder. I further affirm that Worker's Compensation Insurance/Disability Benefits, for all em been secured. I further certify, under the penalties of perjury, that the information given above is true to the best of my knowled that any material misstatement made may result in the revocation or suspension of the license if issued.	ployees, if applicable, has	ıd
	X—————————————————————————————————————		_

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Α	Home Inspection Application
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PRINT NAME		

## Unpaid Field Based Training Log\* 40 Hour Requirement

Applicants should submit this log only if training was not completed at a NYS approved school. A school certificate will be issued in lieu of this log for those applicants who completed the required hours of training through a school.

Date of Home Inspection	Address of Inspected Property	# of hours claimed for Inspection	Name and Unique ID # of Supervising Inspector**	Signature

<sup>\*</sup>Log is subject to verification by this office.

I certify that the information given on this log is true to the best of my knowledge and belief. I understand that any material misstatement made may result in the revocation or suspension of any license/certification issued.

<sup>\*\*</sup>If supervisor is not a licensed home inspector, please indicate profession, i.e. architect or engineer.

В	Home Inspection Application
PRINT NA	ME

# Experience Log\* 100 Home Inspections Required – Unpaid or Paid

Date of Home Inspection	Address of Inspected Property	Name and Unique ID # of Supervising Inspector**	Signature

\*Log is subject to verification by this office
\*\*If supervisor is not a licensed home inspector, please indicate profession, *i.e.* architect or engineer.

I certify that the information given on this log is true to the best of my knowledge and belief. I understand that any material misstatement made may result in the revocation or suspension of any license/certification issued.

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### A COMPLETED APPLICATION MUST INCLUDE:

(Use this checklist to ensure you have included/completed all requirements)

If you do not complete all required responses, your application will be returned.

Page 3 You must check one box in the section for "I am applying as"
Tou must check one box in the section for Tam applying as
Applicant Information:
☐ Complete "Applicant Information".
Business Information (if applicable):
Business Name: Clearly print or type the business name under which you will conduct business (as it appears on the filing receipt or business certificate).
Mailing Address: Only complete this section if you would like your information mailed to an address other than your residence.
Page 4
Background Data: If you answered YES to questions 4, 5 or 6:
Question #4 - court documentation which <u>MUST</u> be submitted: A copy of the certificate of disposition from the court <u>AND</u> a copy of the accusatory instrument * from the court.
☐ Question #5 - court documentation which <u>MUST</u> be submitted: A copy of the accusatory instrument * from the court <u>AND</u> adjournment notice(s) indicating future court date(s) from the court.
☐ Question #6 - you must provide all relevant documents, including the agency determination, (if any).
* An accusatory instrument is a document that is used by prosecutors and the criminal courts to charge and prosecute someone accused of a crime(s) and details the facts and circumstances surrounding the crime(s). This could be an Indictment, Superior Court Information, Criminal Complaint, etc.
Qualification Method:
☐ Check the box that reflects how you are qualifying for the license.
Liability Coverage Affirmation: You must secure and maintain general liability coverage in a minimum amount of \$150,000 per occurrence and \$500,000 aggregate. (You are not required to submit proof of coverage with your application but must be available for review upon request.)  Child Support Statement: (read)  Applicant Affirmation:
☐ Sign your name and date the application.
Page 5 Unpaid Field Based Training Log − 40 Hour Requirement  □ Complete all portions of the log <i>only</i> if your training was not completed at a NYS approved school.  Page 6 Experience Log − 100 Home Inspections Required − Unpaid or Paid  □ Complete all portions of the log <i>only</i> if you are applying based on Experience.
Additional Items to be submitted with your application  Examination Slip:   Attach the passed exam notification (NYS written exam results cannot be more than 2 years old).

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□ \$250.00 payable to the NYS Department of State. (see instructions for acceptable payment methods).

**Application fee:** 

### Become an Organ and Tissue Donor

Organ donors save lives. If you would like to be an organ and tissue donor upon your death, you may enroll in the NYS Donate Life Registry online at www.donatelife.ny.gov/register or complete the form below. Completed forms should be sent to the NYS Donate Life Registry by email – Registry@donatelife.ny.gov or, mail - NYS Donate Life Registry, 185 Jordon Road, Troy, NY 12180.



Fields with an asterisk (\*) are required for enrollment. Upon receipt of your completed enrollment form, you will be sent an email or letter confirming your enrollment and providing you with information on how to limit your donation. I understand that by opting out of enrolling in the NYS Donate Life Registry, or skipping this question, will not impact or impair my ability to obtain services from the New York Department of State, Division of Licensing Services.

*Last name	
*First name	
Middle Initial	Suffix
*Address	
*Apt. Number	*Zip Code
*City	
*Birth date//	/*Gender  M F
Email address	
DMV or IDNYC Number	

By signing below, you certify that you are:

- 16 years of age or older;
- Consenting to donate your organs and tissues for transplantation and/or research in the event of your death;
- Authorizing the New York Department of State, Division of Licensing Services to transfer your name and identifying information to the NYS Donate Life Registry for enrollment;
- Authorizing the Registry to give access to this information to federally regulated organ procurement organizations and NYS-licensed tissue and eye banks and others approved by the NYS Commissioner of Health in the event of your death.

o. you. dods	_

\*Sign \*Date