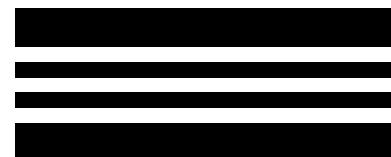


Home Inspector License Application



Apply for a home inspector license.

Online: <https://professions.dol.wa.gov>

Or mail this completed form to:

Home Inspector Program
Department of Licensing
PO Box 3917
Seattle WA 98124-3917



27021-APPLICATIONS

Include:

- a check or money order for **\$720** (payable to the Department of Licensing)
- a copy of your passing document from the testing center

Licenses are available for self-printing with an online account.

If you want us to print and mail your license add a \$5 print fee for each copy to your payment.

\$0 self-print license online.

\$5 each. DOL print and mail license. Quantity _____ Total \$ _____

For questions or language help call: 360.664.6487

Applicant information

TYPE OR PRINT Name as you would like it to appear on your license		Social Security Number (SSN)*	
Full legal name (First, Middle, Last)			
Mailing address (Number, street, and suite or room number)			
City		State	ZIP code
10-digit daytime phone number	Email	Date of birth (mm/dd/yyyy)	
Military? (check if applicable)			
Current or former: <input type="checkbox"/> Military member <input type="checkbox"/> Military spouse or domestic partner			
For Service members and their spouses: When a Service member and their spouse must move due to Military orders, Washington state may recognize their current license or certificate if they provide the following:			
<ol style="list-style-type: none"> 1. A copy of the military orders. 2. A license that is in good standing in all states where the individual held their license before. <ol style="list-style-type: none"> a. During application review, DOL may request an original Certificate of Licensure or Letter of Good Standing from each state. b. There may be continuing education requirements needed for DOL to recognize the license. 			

*You are not required to have a Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN or TIN) to apply for or be issued a license. If you do not have a SSN, ITIN, or TIN, leave that section blank. If you do have a SSN, ITIN, or TIN, you are required by federal and state law to provide it on the application (42 U.S.C. 666(a)(13) and RCW 74.20A.320).

Applicant information (continued)

3. Complete the following table if you hold a license in any state (excluding Washington).

State	License number	Expiration date (mm/dd/yyyy)

Legal background

Answer the questions below. If you answer "Yes," attach a detailed explanation.

1. Within the last 5 years, in this state or any other jurisdiction, have you had any action (fine, suspension, revocation, censure, surrender, etc.) taken against any professional or occupational license, certification, or permit held by you? Yes No
2. Within the last 5 years, in this state or any other jurisdiction, have you defaulted, or been convicted of, or entered a plea of no contest to a gross misdemeanor or felony crime? (Don't include traffic convictions.). Yes No

Applicant signature—Sign and date the declaration below.

I declare under penalty of perjury under the law of Washington that the foregoing is true and correct.

TYPE or PRINT Name

X

Applicant signature

Date and place (city or county) signed

Providing false information in this application may be cause for denial, suspension, or revocation of your professional license in the State of Washington.

RCW 42.56. WAC 308-408A-030.