

CITY OF TOLEDO  
Division of Building Inspection  
One Government Center, Suite 1600  
Toledo, Ohio 43604  
(419) 245-1220 Office  
(419) 245-1329 Fax

HOME INSPECTOR REGISTRATION INFORMATION SHEET

Pursuant to Toledo Municipal Code, Chapter 1765.04, any person certified by I.C.C. (International Code Council) and the Commissioner of Building Inspection to conduct the type of inspection required by the Certificate of Property Code Compliance Inspection shall register with the Commissioner of Building Inspection.

**To register as a Home Inspector, you must submit the attached application form with the following documents:**

- 1) Copy of the ICC completion Certificate for Property Maintenance and Housing Inspector Exam 64  
or  
Certified copy of your certification with the National Association of Home Inspectors (NAHI)  
or  
Certified copy of your certification with the American Society of Home Inspectors (ASHI)
- 2) \$100 fee

Complete Information for **PROPERTY MAINTENANCE AND HOUSING INSPECTOR EXAM 64** certification examination can be obtained from:

International Code Council (ICC)  
Contractor Examination Services Department  
900 Montclair Road  
Birmingham, Alabama 35213  
Phone: 1-877-783-3926

or

Web Site for exam information: <http://www.iccsafe.org/certification/exams.html>

## HOME INSPECTOR REGISTRATION APPLICATION

### APPLICANT

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Suffix: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephones Number ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

### COMPANY

Company Name you will be operating under:

Business Address \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

You **must attach** a copy of your the ICC (International Code Council) completion Certificate for Property Maintenance and Housing Inspector Exam 64 **or** a certified copy of your certification by the National Association of Home Inspectors (NAHI) **or** the American Society of Home Inspectors (ASHI) to this application.

**NOTE: INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED. YOU MUST SUBMIT ALL DOCUMENTATION AT TIME OF APPLICATION. \$100.00 FEE MUST ACCOMPANY THIS APPLICATION. MAIL TO CITY OF TOLEDO, P.O. BOX 844, TOLEDO, OH 43697 OR HAND DELIVER TO ONE GOVT. CENTER., SUITE 1600 @ INTERSECTION OF JACKSON & ERIE STREETS.)**

It is specifically agreed by the applicant any misrepresentation, false statement or fraud in, or in connection with this application shall be cause for revocation or suspension of a license thereon, or shall be cause for denial of application in addition to any other actions or penalties or both to which the applicant may be subject. Applicant further acknowledges that this registration does not entitle the applicant to act as a licensed home improvement contractor.

\_\_\_\_\_  
Applicant Signature

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_  
State of Ohio, County of Lucas

Notary Public \_\_\_\_\_ My commission expires on: \_\_\_\_\_