

Home inspectors

SUPPLEMENTAL APPLICATION

		CURRENT YEAR	MOST RECENTLY COMP	LETED
9.	Annual revenue:			
	If "Yes," does the applicant provide these services provide inspection?	to the same property for whic	h they □ Ye:	s □ No
3.	Is the applicant a licensed general contractor or har	idyman?	□Ye	s 🗆 No
	If "Yes," please provide the percentage:			%
7.	Does the applicant inspect any new construction?		□Ye	s 🗆 No
	If "Yes," please provide the percentage of services	performed for new constructi	on:	%
, ò.	Is the applicant, any employee or anyone that provi architect or engineer?	des services on behalf of the	applicant an □ Ye:	s 🗆 No
5.	Does the applicant or any firm member hold other part of "Yes," please provide details:		☐ Ye:	s 🗆 No
	If "No," please explain:			
↓.	Are all home inspectors licensed where required?		☐ Ye:	s 🗆 No
	If "Yes," how many independent contractors are uti	lized?:		
3.	Does the applicant utilize independent contractors?		□Ye	s 🗆 No
	If "Yes," please provide the full legal name of the fr	anchisor:		
2.	Is the applicant a franchisee?		□Ye	s 🗆 No
١.	Name of applicant or insured:			

	CURRE	CURRENT YEAR		LY COMPLETED L YEAR
	INCOME	NUMBER OF INSPECTIONS	INCOME	NUMBER OF INSPECTIONS
Residential (1–4 units)	\$		\$	
Residential (over 4 units)	\$		\$	
Commercial	\$		\$	
Other (please explain):	\$		\$	
Total	\$		\$	

10. Sources of annual income (percentages of total), must total 100%:

SOURCE	PERCENTAGE OF ANNUAL INCOME
Individual seller/prospective buyer/real estate agency	%
Lender/mortgage company/mortgage broker	%
Developer/investor/syndicator/relocation company	%
Other (please explain):	%

11.		any single client represent more than 25% of the applicant's gross revenue?		☐ Yes	s □ No
	It "Yes	s," please provide details:			
12.	Is the	applicant the exclusive inspector for any real estate agency, developer and/or b	uilder?	☐ Yes	s □ No
	If "Yes	s," please provide details:			
13.	Is ther	e a pre-inspection agreement signed prior to each inspection?		☐Yes	s □ No
	If "Yes	s," please attach a sample.			
14.	What	type of inspection report is used (check all that apply)? $\hfill \square$ Na	arrative	\square Checklist	□ Verba
15.	What	type of computer software is used to generate reports?			
16.	Does t	the applicant include photographs with all reports?		□Yes	s □ No
	If " No	," please provide details:			
17.	What	orofessional associations does the applicant belong to?			
18.	Which	of the following coverage(s) has been requested (check all that apply)?			
	a.	Pool and spa inspections		☐ Yes	□No
	b.	Infrared thermal inspections		☐ Yes	□No
	C.	Mold inspections		☐ Yes	. □ No
	d.	Indoor air quality inspections		☐ Yes	□No
	e.	Septic inspections		☐ Yes	□No
	f.	Lead paint inspections		☐ Yes	□No
	g.	Exterior Insulation Finish Systems (EIFS) inspections		☐ Yes	□No
	h.	Green building inspections		☐ Yes	□No
	i.	Radon inspections		☐ Yes	. □ No
	j.	Termite / WDI inspections		☐ Yes	□No
	k.	Rodent inspections		☐ Yes	□No
	I.	Water well inspections		☐ Yes	. □ No
	m.	Wind mitigation inspections		☐ Yes	□No
	For all	of the above, is the applicant licensed/certified to perform these services?		□Yes	s □ No

SIGNATURE IN FULL:	DATE:	
PRINT NAME:		
ALL QUESTIONS MUST BE ANSWERED A	ND THE APPLICATION MUST BE SIGNED AND DATED	
Agency Name and Address:		
Person Submitting Application:		
Telephone Number:	Email:	

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