



The Commonwealth of Massachusetts
Division of Professional Licensure
 1000 Washington Street Boston, MA 02118
www.mass.gov/dpl/Boards
Board of Registration of Home Inspectors
(617)727-0131

Attach un-mounted recognizable recent photograph in this space with face not less than 3/4 inches wide.

(Photograph taken more than six months prior to filing application is not accepted.)

(Do not use staples when attaching photograph.) Paste or cellophane tape may be used.

**Application For Home Inspector's License
 by Reciprocity**
**Application shall be printed in Ink and
 Filled out by the Applicant**

Board Use Only	
Date Received	_____
Date Accepted	_____
Certificate No.	_____
Date of Issue	_____

Attach a **certified check** or **money order** payable to the **Commonwealth of MA.**
DO NOT SEND CASH

Print name _____
 (Name) (Middle Initial) (Last Name) (Maiden name/alias)

Home Address _____
 (No. Street) (City/Town) (State) (Zip code)

Mail Address _____
 (No. Street) (City/Town) (State) (Zip code)

Tel No _____ Birth date _____ Height _____ Weight _____

Social Security No _____

Pursuant to M.G.L. c. 62C, s. 47A, the Division of Professional Licensure is required to obtain your social security number and forward it to the Department of Revenue. The Department of Revenue will use your social security number to ascertain whether you are in compliance with the tax laws of the Commonwealth. The 1st five-digits of your social security number will be redacted from your application for your protection.

Former Employer _____ Address _____

Your Duties as Employee _____

Dates of Employment (From) _____ (to) _____

Former Employer _____ Address _____

Your Duties as Employee _____

Dates of Employment (From) _____ (to) _____

Have you taken the Home Inspectors examination?

Date of Exam _____ Pass Fail

If passed exam, date and type of license issued _____

Are you a member of the American Society of Home Inspectors? Yes No (Answering no to this question will not affect your eligibility for licensure.)

- List any licenses/certifications you hold in the United States or any country or foreign jurisdiction and the state/jurisdiction from which the license/certification was originally issued. Please attach a certificate of standing from each state or jurisdiction

PLEASE LIST 125 HOME INSPECTIONS PERSONALLY PERFORMED BY YOU

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