NEW YORK STATE OF OPPORTUNITY.

Division of Licensing Services

New York State
Department of State
Division of Licensing Services
Bureau of Educational Standards
P.O. Box 22001
Albany, NY 12201-2001
(518) 486-3803
www.dos.ny.gov

Home Inspection Continuing Education Course Approval Renewal Application

PLEASE READ CAREFULLY, AS INCOMPLETE APPLICATIONS WILL BE RETURNED.

- The non-refundable fee of **$25** must accompany this original, signed application (photocopies will not be accepted). Fees may be paid by check or money order (made payable to the Department of State) or by MasterCard or Visa, using a credit card authorization form. Do not send cash.
- Annual registration period runs from January 1st to December 31st. All locations must be approved.
- All instructors must be approved.
- No classes may begin until final approval is granted.

PLEASE INDICATE THE COURSE, TITLE, CODE NUMBER AND HOURS.

TITLE: CODE NUMBER: L- COURSE HRS:

SCHOOL NAME

ADDRESS (NUMBER AND STREET; ROOM/SUITE DESIGNATION)

CITY STATE ZIP+4

E-MAIL ADDRESS (IF ANY)

PRIMARY LOCATION (NUMBER AND STREET; ROOM/SUITE DESIGNATION)

CITY STATE ZIP+4

SECONDARY LOCATION #1 (NUMBER AND STREET; ROOM/SUITE DESIGNATION)

CITY STATE ZIP+4

SECONDARY LOCATION #2 (NUMBER AND STREET; ROOM/SUITE DESIGNATION)

CITY STATE ZIP+4

SECONDARY LOCATION #3 (NUMBER AND STREET; ROOM/SUITE DESIGNATION)

CITY STATE ZIP+4

1. Is any change being made or is any change contemplated in the presentation of this course in the forthcoming year relative to the study material or procedures for taking attendance?

☐ **Yes*** ☐ **No** **If Yes*, attach explanation of change.**

2. Indicate names and signatures of persons authorized to sign course completion certificates.

PRINT NAME *SIGNATURE OF COORDINATOR*

SIGNATURE *( ) BUSINESS PHONE NUMBER*

PRINT NAME *E-MAIL ADDRESS (if any)*

SIGNATURE *DATE*

FOR OFFICE USE ONLY EFFECTIVE DATE: / / EXPIRATION DATE: / / ENTERED: / / BY: LABEL [ ]

FEE RECEIVED: TO REVENUE: / / APPROVAL MAILED: / / RECEIPT #:

A fee of $20 will be charged for any check returned by a bank for insufficient funds.