

<p style="text-align: center;">CITY OF PHILADELPHIA • DEPARTMENT OF LICENSES AND INSPECTIONS</p>  <p style="text-align: center; font-size: 1.2em;">HOME INSPECTOR LICENSE</p>	<p>WHEN COMPLETED MAIL TO: DEPARTMENT OF LICENSES AND INSPECTIONS LICENSE ISSUANCE UNIT • PUBLIC SERVICE CONCOURSE 1401 JOHN F. KENNEDY BOULEVARD PHILADELPHIA, PA 19102</p> <p>USE A SINGLE CHECK OR MONEY ORDER FOR ALL FEES PAYABLE TO "CITY OF PHILADELPHIA".</p>
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1. NAME OF APPLICANT	2. TELEPHONE NUMBER <i>(Include area code)</i>	3. SOCIAL SECURITY NUMBER
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4. APPLICANT'S ADDRESS	CITY	STATE	ZIP CODE
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5. BILLING ADDRESS <i>(If different than Applicant's Address)</i>	CITY	STATE	ZIP CODE
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6. NAME OF EMPLOYER	7. TELEPHONE NUMBER <i>(Include Area Code)</i>
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8. EMPLOYER'S ADDRESS	CITY	STATE	ZIP CODE
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9. EMPLOYER'S PHILADELPHIA TAX ID NUMBER	10. EMPLOYER'S BUSINESS PRIVILEGE LICENSE NUMBER	11. EMPLOYER'S FEDERAL TAX ID NUMBER/SOCIAL SECURITY NUMBER
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12.

A. Application shall be accompanied by the following:

- 1) Proof of insurance in the following areas in the amount specified:
 - a) **Worker's Compensation and Employer's Liability**
 \$100,000 each accident
 \$100,000 each employee
 \$500,000 policy limit
 - b) **Commercial General Liability** (City of Philadelphia must be listed as a certificate holder.)
 \$100,00 minimum limit (deductible of no more than \$2500)
- 2) Proof of certification with a home inspection association recognized by the Department of Licenses and Inspections.
- 3) Payment of non-refundable application fee of \$300.

B. The licensee shall notify the Department within ten (10) days of any change in the required information.

13. License Type	Fee	Revenue Code	Expiration Date	License Number
<input type="checkbox"/> Home Inspector	\$300.00	3704	10/31/	

14. Applicant Certification

I hereby certify that the statements contained herein are true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statement herein I am subject to the possible revocation of any licenses issued as a result of my false application, and such other penalties as may be prescribed by law.

Applicant Signature: _____ *Date:* _____

FOR OFFICE USE ONLY

PREREQUISITES (LIST THOSE CHECKED DURING PROCESSING):

REMARKS:

APPROVED

REFUSED

REVIEWED BY	NUMBER
DATE	AUDIT

Home Inspector License - Information Sheet

This license is required for all Home Inspectors. Most questions on this form are self-explanatory. The questions that need explanations are discussed below. The numbers match the corresponding numbers on the application form. Please be sure to fill in all the required information. Your application will not be processed unless it is accompanied by proof of insurance in the amounts specified on the application sheet, the application fee (\$300), and proof of certification with a home inspection agency recognized by the Department of Licenses and Inspections.

4. **Applicant's Address**: Use this space for your home address. P.O. Boxes will not be accepted.

5. **Billing Address**: Use this space, if for some reason you would like to have any future mailings, including the information on renewing your license, sent to an alternate address. P.O. Boxes will not be accepted.

9. **Employer's Philadelphia Business Tax Account Number**: This is a number assigned by the Philadelphia Revenue Department to identify tax accounts. All businesses that operate within the City of Philadelphia are required to have a Business Tax Account Number.

10. **Employer's Philadelphia Business Privilege License Number**: Required of every person or business desiring to engage in any business within the City of Philadelphia. The Business Privilege License is a lifetime license (one-time fee of \$250.00) and can be used for all of your businesses operating within the City.

11. **Employer's Federal Tax Identification Number**: For individuals it is the same as your Social Security Number. For other taxable or tax exempt entities, it is the number assigned by the IRS for reporting purposes. If a business does not have a number yet, fill in the Social Security Number of the owner, president, or chief partner. You can supply the business's federal tax number when it is assigned. No applications will be accepted without a Federal Tax ID Number.

12. **Additional Requirements**: Application will not be accepted without proof of insurance in the amounts listed on the application. Applicant must be a certified member of a recognized home inspection association.

13. **License Type**: Check off the appropriate box for the Home Inspector. License Issuance will assign the License Number when the application is processed