## **HOME INSPECTOR ENTITY LICENSE APPLICATION**



## ILLINOIS DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

451

Division of Real Estate 320 West Washington Street, 3<sup>rd</sup> Floor Springfield, IL 62786 800/560-6420

Important Notice: Completion of this form is necessary to make application for approval as a Home Inspector Entity pursuant to the Home Inspector License Act (225 ILCS 441) and Administrative Rule (68 Ill. Adm. Code Part 1410). Failure to complete this application may result in this form not being processed. The Agency Forms Coordinator has approved this application.

Type of Firm: <b>Partnership</b>	Corporati	ion 🗆 Li	mited L	iability Com	pany 🗆	
1. Name of Corporation/Partnership/Limited Liability Company			2. Date of	of Organization	3. FEIN Number	
4. Street Address of Firm (Include P.O. Box if applicable)			5. City,	State, Zip Code	6. Firm Telephone Number	
7. Name of Person Completing Applica	tion					
Email Address of Authorized Repres  8. List All Officers, Directors, General, L		Partners or Memb	ers (Attach s	addendum if neces	= Scarv)	
Name	IL Home Inspector License Number (i	Title (indica	e (indicate officer, director, gen., or managing partner or member)		Address (Street, City, State, Zip Code)	
	applicable)					
9. List All Person(s) and/or Entities having	ng an Ownership Inter	rest (Attach adder	ndum if nece	essary)		
Name/Entity	e Inspector Licen cable)	spector License Number   Percent of		Address (Street, City, State, Zip Code)		
All Home Inspector Entity applications mus	st include the materia	ls listed below:				
<ul> <li>Home Inspector Entity</li> <li>Non-Refundable Applie</li> <li>Articles of Incorporatio authority to conduct but</li> </ul>	cation Fee of \$250.00 n or Organization or	other evidence of			ated outside of Illinois)	
I hereby certify that I personally completed to complete and sign this application for the 441) and the Administrative Rule (68 III. A	e purpose of securing	an entity license u	ınder the Illi	inois Home Inspec		
Authorized Signature of Applicant				Date	<u></u>	
Printed Name						

MAIL APPLICATION, FEE, AND SUPPORTING DOCUMENTS TO:
Illinois Department of Financial and Professional Regulation
Division of Real Estate
Home Inspector
320 West Washington Street, 3<sup>rd</sup> Floor
Springfield, Illinois 62786