



STATE OF ARIZONA
BOARD OF TECHNICAL REGISTRATION

1110 W. Washington St., Suite 240, Phoenix, Arizona 85007, (602) 364-4930 FAX: (602) 364-4931 www.azbtr.gov

APPLICATION FOR REMEDIATION SPECIALIST CERTIFICATION

APPLICATION FEE \$100.00 / Plus Finger Print Card Fee is \$32.00

MAKE CHECK PAYABLE TO "AZ BOARD OF TECHNICAL REGISTRATION"

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK

1. GENERAL INFORMATION

Name Last First Middle
Date of Birth Social Security # (mandatory)
Residence Address
City, State, Zip Tel.#
Business Name & Address
City, State, Zip Tel.#
Email

2. BACKGROUND/DISCIPLINE

If the answer to any of the following questions is "yes," please attach a detailed explanatory statement (use additional sheets if necessary) and related official documentation. Please refer to the "Important Notice to Applicants" in the Instructions.

- 1. Have you ever been refused any registration or certification in any state or jurisdiction?
2. Has any registration or certification of yours ever been suspended or revoked in any state or jurisdiction?
3. Have you ever been the subject of professional disciplinary action, or do you now have such action pending against you in any state or jurisdiction (including Arizona)?
4. Have you ever been the subject of any type of action by a regulatory agency, or do you now have such action pending against you in any state or jurisdiction (including Arizona)?
5. Have you ever been known by a name or names other than the one shown on this application?
6. Have you ever been convicted of a misdemeanor other than a minor traffic violation?
7. Have you ever been convicted of a felony?

Applicant Name \_\_\_\_\_

**3. PREVIOUS REMEDIATION REGISTRATION/CERTIFICATION (Issued by any state)**

PROFESSIONAL REGISTRATION/CERTIFICATION:

Profession	State	Year Reg./Cert.	Reg./Cert.#	How registered/certified - (exam, education and experience, etc.)	Hrs. of Written Exam	Active / Lapsed

**4. PENDING APPLICATIONS**

Do you have a home inspector registration/certification application pending in any state or jurisdiction?  YES  No

If "yes," please list state/jurisdiction \_\_\_\_\_

Current Status of Application \_\_\_\_\_

**5. NATIONAL EXAMINATIONS**

Do you hold a certificate indicating successful completion of the National Home Inspector Examination as administered by the Examiners Board of Professional Home Inspectors (EBPHI)?  YES  No

If "yes," please attach a copy of the certificate.

Applicant Name \_\_\_\_\_

**6. EDUCATION/TRAINING**

ALL EDUCATION MUST BE VERIFIED BY CERTIFIED TRANSCRIPTS FORWARDED DIRECTLY FROM THE REGISTRAR'S OFFICE OF THE COLLEGE OR UNIVERSITY ATTENDED. ALL TRAINING PROGRAMS MUST BE VERIFIED BY A SIGNED COPY OF A CERTIFICATE OF COMPLETION.

Name and Location of Institution / Training Facility	Years: From-To	Graduation Date	Major/Minor	Type of Degree	Training Course Description
	_____ TO _____				
	_____ TO _____				
	_____ TO _____				

**7. CERTIFICATION/RELEASE**

I certify the information contained in this application to be accurate, true and complete to the best of my knowledge.

I authorize any individual, company or institution with whom I have been associated to furnish the Arizona State Board of Technical Registration with any information concerning my qualifications for professional registration/certification in Arizona which they have on record or otherwise possess, and release the individual, company or institution and all individuals from all liability for any damage whatsoever incurred by me as a result of their furnishing such information.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

The original and a copy of this form must be submitted.  
Two copies of all supporting documents must also be submitted.

**NOTICE**

Knowingly making a false statement in connection with this application may be cause for denial of this application and/or referral for criminal prosecution.