

CONTINUING EDUCATION FOR HOME INSPECTORS

State Form 57509 (9-24)
INDIANA PROFESSIONAL LICENSING AGENCY

HOME INSPECTORS LICENSING BOARD PROFESSIONAL LICENSING AGENCY

402 West Washington Street, Room W072 Indianapolis, IN 46204 Telephone: (317) 232-2960 E-mail: pla12@pla.in.gov www.pla.IN.gov

INSTRUCTIONS:

- 1. Complete this form and upload to your online file at MyLicense.in.gov along with the course completion certificates.
- 2. Check box number six (6) if the coursework was distance learning rather than live classroom. Fifty percent (50%) of coursework can be distance learning.
- 3. Indicate in box number five (5) which category of allowed subjects (as defined in 878 IAC 1-5-1 and 878 IAC 1-5-2) each course falls into by marking Category One (1) or Two (2).

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	CATEGORY 1			CATEGO	RY 2	
1A) Heating Sys	tems	2A) Any other site aspects that affect a resident dwelling				
1B) Cooling Syst		2B) Business operations, contract writing, ethic courses, reporting writing, legal liability instruction, or any other formal programming that is specifically directed toward the home inspection industry				
1C) Electrical Sy						
1D) Plumbing Sy						
1E) Structural Co	omponents					
1F) Foundations	000					
1G) Roof Coveri	interior components					
, Exercise and mester compensation						
REQUIREMENTS						
Licensed less that	an twelve (12) months:	No hours are required to renew.				
Licensed twelve	(12) to twenty-four (24) months:	Sixteen (16) hours are required to renew. You may complete all your hours				
Licensed the entire two (2) year period:			in Category One (1) but a maximum of four (4) hours in Category Two (2). Thirty-two (32) hours are required to renew. You may complete all your hours in Category One (1) but a maximum of eight (8) hours in Category Two (2).			
LICENSEE INFORMATION						
Licensee Name License Number			NFORMATION	Date (month, day, year)		
Street Address						
City State			ZIP Code			
Phone Number			Email Address			
1) DATE OF 2) CE PROVIDED NAME 2) COURSE NAME 4) # OF CE 5) CATEGORY 6) DISTANCE						
1) DATE OF COURSE			3) COURSE NAME		5) CATEGORY 1 OR 2	6) DISTANCE LEARNING
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FOR OFFICE USE ONLY						
Evaluator Notes:						
		Compliant	Non-Compliant			