

TO BE COMPLETED BY APPLICANT ONLY

The personal information requested in this form and the results of the Criminal Record check are collected and retained under the authority of Section 26 (c) of the BC *Freedom of Information and Protection of Privacy Act* and Section 144 of the *Business Practices and Consumer Protection Act*. This information will be used to determine eligibility for licensing in the Province of British Columbia.

BUSINESS INFORMATION

All of the contact information that you provide to us may be made public. Your business address, even if it's a home address, will be published on our website. We consider this to be your business contact information and must be available should a customer need to reach you.

1. Legal name:

Last Name
First Name
Middle Name
2. Trade/DBA names (if any):

(Exact name in CAPITAL LETTERS)
3. Physical address:

(Suite #, Street Address, City & Province/State Postal/Zip Code)
4. Mailing address:

(Suite #, Street Address, City & Province/State Postal/Zip Code)
5. Phone: (____) _____ Cell: (____) _____ Web: _____
6. Email: _____

LICENSING INFORMATION

1. Have you previously held a home inspector licence in any jurisdiction? ☐ Yes..... ☐ No
 2. If **YES** above, were any of those licences ever suspended or cancelled? ☐ Yes..... ☐ No
 3. Have you ever been refused a home inspector operator licence in any jurisdiction? ☐ Yes..... ☐ No
 4. Have you ever been subject of disciplinary action related to a home inspection credential issued to you by a home inspection association or authority? ☐ Yes..... ☐ No
 5. Have you ever been convicted of any offence or been subject to any other judicial proceedings under the Business Practices and Consumer Protection Act, or any law governing the business or home inspection in any jurisdiction in the last two years, or are there any proceedings Pending (note that this does not include small claims actions in the Small Claims Court)? ☐ Yes..... ☐ No
 6. Have any of the individuals identified above ever been convicted of an offence under the Criminal Code of Canada or any other statute? ☐ Yes..... ☐ No
 7. Do you currently work or plan to work in any industry related to home inspections? ☐ Yes ☐ No
(Realtor, Residential builder, Residential developer etc.) We request this disclosure due to any potential conflict of interest, that could result in a material gain.
- ☐ If **YES** to questions 2 through 7 above, provide details on a separate sheet, including date(s) and location(s) and parties involved.

- ☐ **ALL APPLICANTS** that reside in Canada **MUST** complete an online criminal record check within one day of sending this application to Consumer Protection BC by going to the following link: <http://www.sterlingtalentsolutions.ca/Consumer-Protection-BC> and following the instructions for completion. (Please note, once complete a copy will be sent directly to Consumer Protection BC.
- ☐ **ALL APPLICANTS** that do not reside in Canada **MUST** submit a certified criminal record check from their home jurisdiction. Please note, your application will not be processed until the criminal record check is received

APPLICANT DECLARATION

I/We hereby confirm that the information supplied is complete and true to my best knowledge and belief.

1. Certifies that I/we have obtained, read and understood the *Business Practices and Consumer Protection Act* and Home Inspector Licensing Regulation;
2. Certifies that all the information given in this application is true and correct to the best of my/our knowledge and belief.
3. Gives permission to Consumer Protection BC to verify bank relationships, memberships and all other matters in this application;

Authorized signing officer of applicant:

Signature _____ Print Name _____

Date _____ Title _____

APPLICATION FEE (see [current fee schedule](#))

Pay by cheque or money order payable to Consumer Protection BC, or

Pay by Credit Card – complete [credit card authorization form](#) using Visa, Mastercard or American Express.

Application fees are non-refundable. A service charge will be applied for any dishonoured payments.

Send completed application form, evidence of completion and required attachments as noted in the application checklist and application fee by mail or by email.

Email operations@consumerprotectionbc.ca

Mail Consumer Protection BC
PO Box 9244
Victoria, BC V8W 9J2

Courier Consumer Protection BC
321-3600 Uptown Blvd
Victoria, BC V8Z 0B9