*New Jersey Office of the Attorney General*
Division of Consumer Affairs
State Board of Professional Engineers and Land Surveyors
Home Inspection Advisory Committee
124 Halsey Street, 3rd Floor, P.O. Box 45043
Newark, New Jersey 07101
(973) 504-6233

# Certification of Providing Direct On-Site Supervision For a Home Inspector Applicant

**The purpose of this form is as follows: A New Jersey licensed Home Inspector must attest to the fact that he or she has been present for and provided direct supervision to the applicant for licensure as a Home Inspector during the applicant's performance of the 250 required inspections and/or 40 hours of field inspections provided by an approved school. Additionally, the New Jersey licensed Home Inspector must take full responsibility for the inspections and any report produced from said inspections. [See N.J.S.A. 45:8-68 et seq. and N.J.A.C. 13:40-15.6a]**

## Certification of Direct On-Site Supervision

I,_____, in completing this certification for the Home Inspection Advisory Committee, have been present for and provided direct supervision over_____*(#)* training inspections to_____*(name of applicant)* in his or her quest to qualify as a Home Inspector. These inspections were performed during the period of __/__ through __/__. Each inspection has been identified below.
Mo. Yr. Mo. Yr.

I (the applicant) further swear (or affirm) that I have read N.J.S.A. 45:8-61 et seq., together with the Rules and Regulations of the Home Inspection Advisory Committee, N.J.A.C. 13:40-15.1 through 15.23, and fully understand that in receiving licensure from the Committee, I have bound myself to be governed by N.J.S.A. 45:8-61 et seq. and N.J.A.C. 13:40-15.1 through 15.23.

Signature of licensee

New Jersey Home Inspection License Number

Signature of applicant

New Jersey Application Number

| Date of Inspection | Location | Client's Name | Contact Telephone Number |
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