



500 James Robertson Parkway  
 Nashville, TN 37243  
 Tel: 615-741-2981  
<http://www.tn.gov/commerce/>

FOR OFFICE USE ONLY  
 LICENSE TYPE \_\_\_\_\_  
 TRANSACTION TYPE \_\_\_\_\_  
 FILE NUMBER \_\_\_\_\_  
 ENTITY NUMBER \_\_\_\_\_  
 APPLICATION NUMBER \_\_\_\_\_  
 AMOUNT PAID \_\_\_\_\_

**ADD ADDITIONAL SPECIALTY APPLICATION  
 BUILDING/FIRE/MECHANICAL/PLUMBING CODE INSPECTOR**

**Submit this application along with all supporting documentation. Please print all information. The certificate and identification card will be mailed to the business address on the application form.** Once approved, the additional certification(s) will be valid for the period of the initial certification. Authority: Tenn. Code Ann. §§ 68-102-113, 68-120-106, 68-120-113, and 68-120-118, and Tenn. Comp. R. & Regs. 0780-02-16.

Information about the certification of building, fire, mechanical, and plumbing code inspectors can be found on the Department's website: <https://www.tn.gov/commerce/fire/permits-licensing/fire-tn-certified-code-inspectors.html>. If you have further questions, please contact the Division of Fire Prevention, Permits and Licensing Section at (615) 741-2981 or SFMO.permits-licensing@tn.gov.

Applicant Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone #: ( ) \_\_\_\_\_ Email Address: \_\_\_\_\_

I prefer to receive email communication from the Department of Commerce and Insurance, Division of Fire Prevention, Permits and Licensing Section.  Yes  No

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Business Address: \_\_\_\_\_

Work Phone #: ( ) \_\_\_\_\_ Fax #: ( ) \_\_\_\_\_

Please provide information about your current certification specialty or specialties below:

Certification #: \_\_\_\_\_ Expiration Date for Certification: \_\_\_\_\_

<b>Current certification specialty or specialties held (check all that apply):</b>			
<input type="checkbox"/> Fire	<input type="checkbox"/> Building Residential	<input type="checkbox"/> Plumbing Residential	<input type="checkbox"/> Mechanical Residential
	<input type="checkbox"/> Building Commercial	<input type="checkbox"/> Plumbing Commercial	<input type="checkbox"/> Mechanical Commercial

<b>Additional Area(s) of Certification Applying For (check all that apply):</b>	
____ Fire Code Inspector	____ Residential Building Code Inspector ____ Commercial Building Code Inspector ____ Residential <u>and</u> Commercial Building Code Inspector
____ Residential Mechanical Code Inspector ____ Commercial Mechanical Code Inspector ____ Residential <u>and</u> Commercial Mechanical Code Inspector	____ Residential Plumbing Code Inspector ____ Commercial Plumbing Code Inspector ____ Residential <u>and</u> Commercial Plumbing Code Inspector



500 James Robertson Parkway  
 Nashville, TN 37243  
 Tel: 615-741-2981  
<http://www.tn.gov/commerce/>

**Proof of Qualifications Necessary for Certification**

**Please provide proof of certification with the International Code Council (ICC), National Fire Protection Association (NFPA), or other nationally recognized code organization as attachment(s) to this application.** Complete only the information applicable to your added certification type(s). If you are claiming certification by another nationally recognized fire and/or building code organization, please do the following: (1) provide details on the organization and their certification program, and (2) attach supporting data.

<b>Building Code Inspector</b>	<b>International Code Council (ICC) Certification:</b> Residential #: _____ Date of Issue: _____ Expiration date (if applicable): _____ Commercial #: _____ Date of Issue: _____ Expiration date (if applicable): _____
<b>Fire Code Inspector</b>	<b>International Code Council (ICC) Certification:</b> Certification #: _____ Date of Issue: _____ Expiration date (if applicable): _____ <b>National Fire Protection Association (NFPA) Fire Inspector Certification:</b> Certification #: _____ Date of Issue: _____ Expiration date (if applicable): _____
<b>Mechanical Code Inspector</b>	<b>International Code Council (ICC) Certification:</b> Residential #: _____ Date of Issue: _____ Expiration date (if applicable): _____ Commercial #: _____ Date of Issue: _____ Expiration date (if applicable): _____
<b>Plumbing Code Inspector</b>	<b>International Code Council (ICC) Certification:</b> Residential #: _____ Date of Issue: _____ Expiration date (if applicable): _____ Commercial #: _____ Date of Issue: _____ Expiration date (if applicable): _____

I hereby certify I have read and understand the provisions of law relating to the Codes Inspector program. This application is made in good faith, and the answers and statements made herein are full, correct, and true to the best of my knowledge. I understand that any and all information herein required by the Codes Inspector program is considered part of my application.

I attest under penalty of perjury that I am a United States citizen or a qualified alien pursuant to Tenn. Code Ann. § 4-58-102. I further attest that I understand that submitting false information or omitting pertinent or material information in connection with this application or any violation of the Eligibility Verification for Entitlements Act may result in the revocation of any license, registration, certification, or other benefit issued to the applicant. A person who willingly makes a false, fictitious, or fraudulent statement or representation of United States citizenship may be prosecuted under 18 U.S.C. § 911 and/or the False Claims Act, Tenn. Code Ann. §§ 4-18-101, *et seq.*

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date