**YOUR CITY LOGO, CONTACT INFO ETC**

**INDEPENDENT THIRD PARTY ENERGY INSPECTOR REGISTRATION FORM**

To register as an Independent Third-Party Energy Inspector, complete and present this form in person with valid photo identification.

**INSPECTOR INFORMATION**

Name:

Driver’s Lic. No. State:

Address (No P.O. Box):

Phone Number: ( )

City:

State: Zip Code: Email Address:

**BUSINESS OR COMPANY INFORMATION (IF ANY INFORMATION IS DIFFERENT)**

Company’s Name:

Phone Number: ( )

Business Address (No P.O. Box):

Fax Number: ( )

City:

State: Zip Code: Email Address:

**INSPECTOR CERTIFICATION**

**Appropriate Type of Certification Certificate Number**

ICC Commercial Energy Inspector

ICC Commercial Energy Inspector/Plans Examiner w/ ASHRAE 90.1

ICC Commercial Energy Plans Examiner

ICC Residential Energy Inspector/Plans Examiner

**ACKNOWLEDGEMENT**

I am trained and certified to perform inspections &/or plan review for compliance with the IECC. I attest that I am not affiliated with a builder or construction company and that I am an independent third-party agent. I understand that the City of **YOUR CITY** will confirm my status through ICC.

Signature:

Date:

**FOR OFFICE USE ONLY**

Energy Inspector Registration No. :

Expiration Date:

**FOR OFFICE USE ONLY SECTION IF NEEDED**