



Mississippi Home Inspector Division

ADMINISTRATOR
E. C. Neely, IV

ROBERT E LEE BUILDING SUITE 502
239 NORTH LAMAR ST, JACKSON, MS 39201

P.O. BOX 4915
JACKSON, MS 39296

(601) 359-5443 – Office
(601) 359-5441- Office

www.mhid.ms.gov

APPLICATION FOR HOME INSPECTOR LICENSE

Application Fee: \$175
License Fee: \$325

LICENSE APPLICATION FOR MISSISSIPPI RESIDENT NON RESIDENT RECIPROCAL

Name of Applicant _____

Residence Address _____

Business Address _____

Drivers License # _____ SS# _____

Business Phone # _____ Home Phone # _____ EMAIL _____

❖ Please indicate if you have been licensed or certified as a real estate appraiser, broker, or salesperson in Mississippi or any other state. No, I have not been licensed. Yes, I have been licensed.

❖ Type of license: _____ State where obtained: _____ Valid dates of license: _____

❖ Please indicate if you have been denied a professional license in Mississippi or any other state.
 YES NO

(If yes, furnish the date, state, and license type denied.)

❖ Has any license held by you been revoked or suspended in this or any other state?
 YES NO

(If the answer is "YES," furnish a statement of details)

❖ What has been your business occupation for the past 5 years? State where you were employed for 60 days or more and account for the entire time. If self-employed, list the nature of the business and business address.

(Employer) (Street & Number) (City & State) (From) (Until)

(Employer) (State & Number) (City & State) (From) (Until)

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- ❖ Have you ever been convicted, pled guilty, or no contest to any criminal offense?
 YES NO Misdemeanor () Felony ()

(If the answer is "YES," furnish a statement of details)

- ❖ Has anyone obtained a judgment against you in any court?
 YES NO

(If "YES," give dates, disposition, or, if appropriate, petition for voluntary bankruptcy schedule and discharge)

- ❖ Are you an American Citizen?
 YES NO

(If no, how long have you been in the U.S.?)

- ❖ Date of Birth _____ Place _____
- ❖ How long have you been a resident of your present state? _____
- ❖ Give the name of the city, county, and state where you are registered to vote. _____
- ❖ Last year, did you file income tax in Mississippi?
 YES NO

(If "NO," please explain)

HOME INSPECTOR EDUCATION

(All Applicants)

Listed below are the Home Inspection courses you have completed that satisfy the requirements for licensure. The original certificate, or a certified copy thereof, must be attached.

Course Title	Provider	Number of Hours	Month/Year Completed



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A F F I D A V I T

(Read Carefully)

The undersigned, in making this application to the Mississippi Home Inspector Board for a license to carry on the business of home inspecting under the provisions of the Home Inspector Regulatory Act, swears that he or she has read and is thoroughly familiar with the provisions of the Act, and Rules/Regulations issued by the Board, and agrees to comply fully with them.

The undersigned further swears that all of the information in this application is true and correct to the best of his or her knowledge and belief. It is understood that any omissions, inaccuracies, or failure to make full disclosure may be deemed sufficient reason to deny a permit or permission to take an examination or to deny licensure or certification after examination or to withhold renewal of or suspend or revoke a permit/license or certificate issued by the Board.

All applications maintained in the office of the Board are a matter of public record. Therefore, this application and other information submitted with the application may be reviewed by members of the general public under reasonable rules and regulations established by the Board.

I hereby authorize any financial institutions, education institutions, or other agencies, public or private, federal or state, to release any information in their files to the Mississippi Real Estate Appraisal Board and/or the Mississippi Home Inspector Division. I also agree to cooperate fully with any investigation involving possible violations of the Act and Rules/Regulations established by the Board.

Signature of Applicant _____

Subscribed and sworn to before me, this _____ day of _____, 20 _____.

My commission expires: _____
Notary Public

(S E A L)

County



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P H O T O G R A P H S

(Attach photos below, one full-face view and one side view)

PLEDGE/CERTIFICATION

I _____,

(please print)

pursuant to the guidelines established by the Mississippi Home Inspector Regulatory Act of 2001 (Act), pledge to comply with the standards of professional practice and generally accepted ethical rules to be observed by a licensed Home Inspector as directed by the Mississippi Home Inspector Regulatory Board (Board). I understand that after a public hearing, the Board may make such modifications above those standards and ethical rules as the Board deems appropriate for Mississippi. I also certify that I have read the Act and Rules/Regulations established by the Board and understand the types of misconduct, as outlined in the Act and Rules/Regulations, for which disciplinary proceedings may be initiated against me as a licensed/certified home inspector.

(Signature)

Subscribed and sworn to before me, this _____ day of _____, 20 _____

(S E A L)

(NOTARY PUBLIC) (COUNTY) (STATE)

My commission expires: _____

Revised 2/9/25