



Ohio Construction Industry Licensing Board Manufactured Home Installer License Application

Read instructions carefully before returning for processing.

1. Complete application in its entirety and legibly. Application must be signed, or it will not be processed.
2. Verify you have included all the required items on the checklist found on the last page.
3. Proof of insurance must be provided. See Section 3 for requirements.
4. If you held an installer's license from a different state, you must include a copy of that valid license.
5. Along with the affirmation training and exam completion, you must provide a copy of the certificate of completion as well as proof of passing the State Examination for Installers.
6. You must include a passport photo with the original signature or a clear copy of your driver's license or state identification card.
7. If paying with check or money order, please make payable to *Treasurer, state of Ohio*.

Total non-refundable amount due is \$253.50(\$250.00 application fee plus a \$3.50 eLicense transaction fee).

Section 1: Applicant Information (Please Print)

License Number:			
Name:		Alias:	
Mailing Address:		City:	
State:	ZIP Code:	County:	Email:
Phone:	Fax:		Cell:
Date of Birth:	Are you a veteran or member of the US Armed Forces? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is your spouse a veteran or member of the US Armed Forces? <input type="checkbox"/> Yes <input type="checkbox"/> No	



Section 2: Employer (If Self-Employed, Use Your Business Name for Employer)

Employer Name:		Phone:
Address of Employer:		
City:	State	ZIP Code:

I have attached a copy of my or my company's Workers' compensation with number visible or explanation of exemption.

Section 3: Proof of Insurance

Please select one of the following:

- I have provided evidence of one of the following (check one)
- \$25, 000 Surety Bond
- \$300,000 in General Liability Insurance and \$ 10,000 Surety Bond
- \$1,000,000 in General Liability Insurance

***Proof must include the insuring company's name, telephone number, your policy number, the dollar amount and the expiration date.**

Section 4: Other License(s) Held

State & Number:	State & Number:
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Section 5: Reference Letters

Three letters of reference are required. Persons signing the letters of reference must be installers, retailers, manufacturers, manufactured home park operators, design professionals or certified manufactured home inspectors familiar with your installation work experience and competency. (Attach all three letters to your application).

Section 6: Employment History

List your work history beginning with your most recent position. Describe in detail your duties, responsibilities, and technical areas. For evaluation of your education for experience credit, attach a copy of transcript, diploma, certificate, or degree.

Employer's name:	Period of Employment From: _____ To: _____
Address:	Hours worked per week:
Phone:	Position/title:
Describe work performed:	



Section 7: Experience Verification

Experience verification form is required. Persons signing form must be a supervisor or another responsible person, who can attest to the applicant's experience installing manufactured homes for at least one year. Self-verification is not acceptable.

Supervisor / Verifier / Applicant Information*

*Name of Verifier:			Position/Title:
Mailing Address:			City:
State:	ZIP Code:	County:	Email:
Phone:		Name of Applicant:	

Notarized verification of qualifications is required for certification with the state of Ohio. Describe in your own words the applicant's experience. Give the name of the applicant's employer and dates of employment. Describe the applicant's position and type of work performed, including the types of buildings, structures or projects. Please provide any additional details that might help evaluate experience. Additional sheets may be attached.

Verified Experience

I certify that I know the applicant, and have direct knowledge the applicant has installed homes for at least one year.

Applicant was employed from: _____ Year: _____ to Month: _____ Year: _____ as
(Position/Title): _____ at (Company Name): _____

Duties, skills, functions of applicant: _____

How was knowledge of the above facts acquired? _____

By my signature, I affirm the information I provided is true, correct and complete.

Signature of verifier (must sign in the presence of a notary):

Notary Public

State of Ohio, County of _____, subscribed and sworn to before me a Notary Public in and for said county personally appeared _____ who acknowledged the signing of the foregoing instrument and that such signing is his/her free act and deed. In testimony whereof, I have hereunto set my hand and affixed my official seal this ___ day of _____, 20__.

Notary Public Signature:	My commission expires:
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Section 8: List Your Five Most Recent Manufactured Homes or Home Components Installed in Ohio

Homeowner Name:	Homeowner Address:
Homeowner Phone:	Home Manufacturer:
Home Serial Number:	Home Location:
Briefly describe work you performed:	
Homeowner Name:	Homeowner Address:
Homeowner Phone:	Home Manufacturer:
Home Serial Number:	Home Location:
Briefly describe work you performed:	
Homeowner Name:	Homeowner Address:
Homeowner Phone:	Home Manufacturer:
Home Serial Number:	Home Location:
Briefly describe work you performed:	
Homeowner Name:	Homeowner Address:
Homeowner Phone:	Home Manufacturer:
Home Serial Number:	Home Location:
Briefly describe work you performed:	
Homeowner Name:	Homeowner Address:
Homeowner Phone:	Home Manufacturer:
Home Serial Number:	Home Location:
Briefly describe work you performed:	



Section 9: Statement Affirming Completion of Training and Examination

I, _____, affirm that I have completed an Ohio Construction Industry Licensing Board (OCILB) approved installation training course and have passed the state examination. I will provide OCILB with proof of completion of the training course and state examination.

By my signature, I affirm that I also understand that my license to install manufactured homes in Ohio is contingent upon completion of the training course and state examination. Failure to provide evidence of completion of these items to OCILB may result in the denial of my application.

Applicant Signature:	Date:
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Section 10: Statement Regarding Felony Conviction

Yes No

If you have been convicted, provide a certified copy of the conviction mailed directly from the court to the OCILB office.

Applicant Signature:	Date:
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Section 11: Acknowledgement and Signature

- I have installed manufactured homes for at least one year.
- All required items as listed on the checklist found on page 8 of this form are attached.

I affirm the information I provided is true, correct and complete. I understand incorrect statements or omission of material facts may results in denial of my application.

I further understand and authorize OCILB and its agents to investigate this application and verify the statements contained herein.

Applicant Signature:	Date:
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Public Information Disclosure: Pursuant to Chapter 149 of the Ohio Revised Code, please be advised that information submitted in this application may be utilized or published by the licensing agency for the purpose of disseminating licensing information to the public. Only information subject to Ohio Public Records law and deemed useful to the industry or public shall be disseminated.



Checklist for Installer License Application

- Check or money order made payable to Treasurer, state of Ohio. If paying with a debit or credit card, print off Credit Card Authorization Form. Complete the form and return with this packet.**
- Completed and signed application.
- Copy of valid installers license from another state if applicable (Section 4).
- Signed and notarized experience verification form (Section 7).
- Signed statement of completion of training and examination (Section 9).
- Copy of certificate of completion of 12-hour training course and proof of passing state examination for installers.
- List of five most recent Ohio homes installed (Section 8).
- Three Letters of Reference (Section 5).
- Signed statement regarding felony conviction (Section 10).
- Evidence of insurance (Section 3).
- Copy of Workers' compensation certificate of explanation of exemption (Section 2).
- Passport size photo with original signature or clear copy of your driver's license or state identification card.