

# WASHINGTON ASSOCIATION OF BUILDING OFFICIALS SPECIAL INSPECTION REGISTRATION PROGRAM

### KEY PERSONNEL REINSTATEMENT APPLICATION FORM

<u>DIRECTIONS:</u> Please answer all questions thoroughly. Type or print all responses. Refer to WABO Standard No. 1701 for detailed application prerequisites.

Mail / email the **completed** application along with the appropriate application fee to: WABO, PO Box 7310, Olympia, WA 98507-7310 or registration@wabo.org.

**NOTE:** Applications must be accompanied by a letter of recommendation from the agency.

#### **APPLICATION FEE: \$80.00 PER KEY PERSONNEL CERTIFICATE**

#### MAKE CHECKS PAYABLE TO: WABO

#### **KEY PERSONNEL REINSTATEMENT**

Key personnel failing to renew their certificate of registration prior to the assigned expiration date may apply for reinstatement of their certificate if:

- 1. Their employing agency is a WABO Special Inspection Program registered agency (or has an application submittal package in process to become a WABO Special Inspection Program registered agency on file in the WABO office); and
- 2. They submit a completed Key Personnel Reinstatement Registration Application form along with the prescribed fees;
- **3.** An application and prescribed fee are received in the WABO office within 60 calendar days of the expiration of a Certificate of Registration; and
- 4. An application must include an acceptable explanation(s) of why the expired certificate of registration was not renewed in a timely manner during the normal renewal process;
- **5.** An application will not be accepted from any key personnel individual who has had a certificate of registration suspended or withdrawn.



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# KEY PERSONNEL REINSTATEMENT APPLICATION FORM

(MUST BE RECEIVED WITHIN 60 DAYS OF THE EXPIRATION OF A CERTIFICATE OF REGISTRATION)

## REINSTATEMENT FEE: \$80.00 PER CERTIFICATE OF REGISTRATION

1.	APPLICANT INFORMATION				
Applic	Supervisir	Director <b>(\$80)</b> ng Laboratory Tech  spection Field Sup	, ,		
	ant Name:(Last) Address:		(First)	(MI)	
TIOTHE	Address:(No. and Street)				
(City)		(State)	(Zip Code	e)	
Home	Phone:	Email:			
Agenc	y Employer Name:				
Agenc	y Location:				
Agenc	y Phone Number:				
2.	TYPE(S) OF WORK FOR WHICH APPLICANT IS SEEKING REGISTRATION  Key personnel may become registered to direct or supervise any number of types of work  Check each type of work you are applying for below:  Reinforced Concrete (RC)*  Prestressed Concrete (PC)**  Spray-Applied Fire-Resistive Materials (FP)  Structural Wood (SWD)				
	Shotcrete (SC)** Structural Masonry (SM) Structural Steel and Bolting (SS Structural Welding (SW)	SB)	Mass Timber Endorseme Cold-Formed Steel Fram Post-Installed Anchors (F Fire-Resistant Penetration	ing (CF) PA)	

- \* Requires current ACI certification as an ACI Field Technician Grade 1. (Refer: WABO Bulletin No. R-99-01)
- \*\* Reinforced Concrete registration is a prerequisite for obtaining this inspector registration.
- \*\*\* Structural Wood registration is a prerequisite for obtaining this inspector registration endorsement.

3.	EXPLANATION(S) OF WHY THE EXPIRED CARD WAS NOT RENEWE MANNER DURING THE NORMAL RENEWAL PROCESS. (If additional space is needed, attach supplemental sheets).	D IN A TIMELY
4.	INFORMATION ACCURACY CERTIFICATION AND INQUIRY CONSEN	т
	I certify that all statements, answers, and information given as a part the are accurate to the best of my knowledge. I understand that giving fainformation may be cause for rejection of this application or revolved registration as a special inspection agency.	alse and/or misleading
	I consent and authorize representatives of the Washington Association request any information concerning my previous employment, education other information pertinent to this application.	
(Signa	iture of Applicant)	(Date)