

MANUFACTURED HOME INSTALLATION BOARD INSTRUCTIONS FOR APPLICANTS

The following are needed in order to apply for licensure as a manufacturer home installer by reciprocity:

1. A completed, signed and notarized application.
2. Check or money order (non-refundable) made payable to State of Delaware. See fee schedule available at www.dpr.delaware.gov to determine the pro-rated fee.
3. Certified copy of a birth certificate, passport, an identification card issued by the State of Delaware or a driver's license issued by the State of Delaware.
4. Copy of legal document showing name change if name is different on any submitted documents.
5. A bond in the amount of at least \$10,000 sent directly to the Board office from the bond company.
6. Proof of liability insurance in the amount of at least \$100,000 sent directly to the Board office from the insurance company.
7. Letters of good standing from all jurisdictions where the applicant is or has ever been licensed.

Please note: It is the responsibility of the applicant to ensure that all licensure requirements are fulfilled and to arrange for the Board to receive all necessary supporting documents. The Board may request additional information or documents if clarification is needed.



CANNON BUILDING
861 SILVER LAKE BLVD., SUITE 203
DOVER, DELAWARE 19904-2467

STATE OF DELAWARE
DEPARTMENT OF STATE
DIVISION OF PROFESSIONAL REGULATION

TELEPHONE: (302) 744-4500
FAX: (302) 739-2711
WEBSITE: WWW.DPR.DELAWARE.GOV

Application for a Manufactured Home Installer License by Reciprocity

Section 1: Basic Information

1. Name _____
Last First M.I.

2. Mailing Address _____
Street

_____ City State Zip

3. Street Address (if different) _____
Street

_____ City State Zip

4. Home Telephone: _____ Work Telephone: _____

5. Email Address _____

6. Social Security Number _____

7. If name is different from that on other submitted documentation, list the other name(s) that may be used. _____ Attach copy of legal documentation.

8. Birth date _____ **Attach certified copy of the applicant's birth certificate, a passport, an identification card issued by the State of Delaware or a driver's license issued by the State of Delaware.**

9. Employer's Name _____

10. Employer's Address _____

Section 2: General Information

11. Have you ever had your professional license subject to disciplinary action (including but not limited to consent agreements, fine, probation, suspension or revocation?)

Yes No **If yes, submit a letter giving a complete explanation.**

12. Has any jurisdiction rejected your application or revoked your professional license?

Yes No **If yes, submit a letter giving a complete explanation.**

13. Are any resolved or unresolved complaints or disciplinary actions pending against you in any jurisdiction? Yes No **If yes, submit a letter giving a complete explanation. Include copies of all appropriate records.**

14. Have you ever been convicted of or entered a plea of guilty or *nolo contendere* (no contest) to any felony, misdemeanor or any other criminal offense in any jurisdiction, including any offense for which you have received a pardon? Yes No **If yes, submit a certified copy of your criminal history record.**

15. Are there any criminal charges pending against you in any jurisdiction?
Yes No **If yes, submit a certified copy of your criminal history record.**

Section 3: Bond Information

16. Name of bond company _____

17. Address of bond company _____

A bond in the amount of at least \$10,000 must be sent directly to the Board office from the bond company.

Section 4: Liability Insurance Information

18. Name of liability insurance company _____

19. Address of liability insurance company _____

Proof of liability insurance in the amount of at least \$100,000 must be sent directly to the Board office from the insurance company.

Section 5: Educational Requirements

20. Name of course attended _____

21. Date of completion _____

Section 6: Licensure in Other States

22. Please list all states in which you hold or have ever held a license.

<u>State</u>	<u>License Number</u>	<u>Date of Issuance</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

A letter of good standing must be sent directly to the Board office from all jurisdictions where the applicant is, or has ever been, licensed.

