Louisiana Uniform Construction Code Commission
600 North Street, Baton Rouge, LA 70808 Phone: 225.765.2301 Email: tsrevette@lsuccc.la
www.luccc.louisiana.gov

INSPECTOR LICENSE APPLICATION

COMPANY

APPLICATION INSTRUCTIONS

1. **Save** this application to your computer before starting. **Re-Save** after completion.
2. Complete all sections and provide all information, unless instructed otherwise.
3. **Social Security Number, Dates of Birth, Tax ID, etc. must be provided where indicated.**
   - Failure to provide this information may result in the delay or denial of your registration.
   - SSN's and Taxpayer ID's will not be released for any other purpose not provided by law.
4. Names, titles, signatures, dates, etc. must be completed where indicated. (E-signatures will be accepted.)

ADDITIONAL REQUIRED DOCUMENTS

1. Scan and attach to this application the following items:

   ☐ Copy of each Principal's current State Issued ID (Driver's license or state ID card).

   ☐ Copies of any required documents based on how the Principal answered their Legal Questions on their Sub-Application form.

   ☐ Copy of the company's original Articles of Organization (if LLC) or Articles of Incorporation (if Inc).

   ☐ Copy of the company's current Operating Agreement (if LLC) or By-laws (if Inc).
   - ➢ Note: If the applicant does not have an Operating Agreement or By-laws then disregard this item.

2. Email copy of Certificate of Insurance showing Professional Liability coverage. See page 3 for more information.

SUBMISSION INSTRUCTIONS

Once application is properly completed with all required documents scanned and attached, submit the application packet using the Application Submission Form to submit through the LUCCC website.

If you have questions about this application or the licensing process, contact Ms. Revette at (225) 346-6313 or tsrevette@lsuccc.la.

Please also read the following information:

License applicants are given **one year from the date the application is received** to meet all requirements. If all requirements are not met within the one-year timeframe, the application will be written off, and the applicant will be required to resubmit a new application and current documents to restart the licensing process.

Misrepresentation of information supplied by an applicant shall be deemed sufficient cause for denial of an application or revocation of a license and/or subject to criminal prosecution for making false official statements, in accordance with LA R. S. 14:133.

Failure to provide all required information and documentation will result in a delay in the issuance of your license. You will be notified via email if any issues are found or if additional documentation is needed as the application is being processed.

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PRIVATE INSPECTOR COMPANY

LICENSE APPLICATION

IMPORTANT – READ BEFORE CONTINUING

Before starting this application, the Applicant must be registered with the Louisiana Secretary of State's office.
This is required for Louisiana companies AND out-of-state companies, no exceptions.
A license will not be issued until the Applicant is "Active" and "In Good Standing" with the Louisiana Secretary of State.

1 APPLICANT INFORMATION

A Name of Company *(exactly how it appears with the Louisiana Secretary of State)*

B Federal Employer Identification Number (EIN) for Company

EIN:

C Louisiana Secretary of State's Charter Number assigned to Company

Charter Number: *(This number will be 8 numbers and a letter. Be sure to include the letter.)*

D Mailing Address for Company

P.O. Box or Street Address:

City: State: Zip:

E Physical Address for Company

Street Name and Number:

City: State: Zip:

F Phone Numbers for Company

Work: Cell: Fax:

G Email Address for Company

Email:

H Company's Current Principal(s)

"*Principal*" means an owner, shareholder, or officer or director of a corporation; a member or manager of a limited liability company; a general partner of a partnership; a sole proprietor; a trustee; or a full-time employee with similar operational control or significant influence with respect to any person as determined by the commission.

Principal 1:	**Full Legal Name:**	**Title:**
Principal 2:	**Full Legal Name:**	**Title:**
Principal 3:	**Full Legal Name:**	**Title:**
Principal 4:	**Full Legal Name:**	**Title:**
Principal 5:	**Full Legal Name:**	**Title:**
Principal 6:	**Full Legal Name:**	**Title:**
Principal 7:	**Full Legal Name:**	**Title:**
Principal 8:	**Full Legal Name:**	**Title:**

**Use a separate page if company has more than 8 principals*

2 FINANCIAL STATEMENT

Pursuant to R.S. 37:3744(A)(3), a Private Inspector Company is required to complete this Financial Statement.

INSTRUCTIONS:

- **Section A:** "Name of Company" will be the name of the business. CPA, Bookkeeper or Accountant should provide the business's financial information in this section.
- **Section B:** A Principal of the company will print and sign their name for on the bottom, left of this section. The CPA, Bookkeeper or Accountant, who completed Section A, must print and sign their name and select their Title on the bottom, right of this section.
- **Net Worth** minimum amount requirement is **$10,000**.
  - NOTE: If the business does not satisfy the Net Worth requirement, then in addition to this Financial Statement page, the applicant may also provide an irrevocable letter of credit to satisfy the net worth requirement.
- The financial information provided below must be current, within twelve (12) months of the date of filing the application. The Financial Statement shall be accurate as of the date submitted.

A Financial Information

Part A must be completed by a CPA, Bookkeeper or Accountant.

Name of Company:	
Date prepared on:	

Total Assets:	**$**
Total Liabilities:	**$**
NET WORTH:	**$**

B Certification of Information

The undersigned applicant and preparer declare to the best of their knowledge that the information provided in this financial statement affidavit of assets, liabilities and other information is true, correct and complete under penalties of perjury.

Print Name of Principal of Company

Print Name of Preparer

Signature of Principal of Company

Signature of Preparer

Date Signed

Title of Preparer – ***Select one of the following:***

- ☐ Certified Public Accountant
- ☐ Accountant
- ☐ Bookkeeper

3 INSURANCE INFORMATION

- All Private Inspector Companies are required to have Professional Liability insurance coverage with a minimum amount of **$500,000** and maintain continuous coverage while the license is active.
- Proof of coverage must be submitted to LUCCC at the time of application and at every subsequent renewal of the insurance policy (not when the license renews).
- Your insurance agent/broker must email the Certificate of Insurance to tsrevette@lsuccc.la.
- LUCCC must be listed as the Certificate Holder on the insurance document with the address of 600 North Street, Baton Rouge, LA 70802.

4 AFFIRMATION

Name of Applicant (Company Name):

By signing my name below, I am affirming all statements made on the behalf of the Applicant within this Private Inspector Company license application.

_____ _____

Print Name *(of person completing this application)* Title *(of person completing this application)*

_____ _____

Signature *(of person completing this application)* Date

IMPORTANT

Each Principal listed on Page 1 of the

Private Inspector Company

License Application

must complete a ***Sub-Application*** form.

This form is found on the following pages.

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PRIVATE INSPECTOR COMPANY

SUB-APPLICATION

- **Each** Principal listed on Page 1 of the License Application must complete a ***Sub-Application***.
- If the company has more than one principal, an additional Sub-Application can be found at: https://lsuccc.la/wp-content/uploads/LUCCC_Sub-ApplicationPrincipal.pdf.

1 IDENTIFYING INFORMATION

Please read the following regarding completing A or B below:

At times, a "Principal" listed on page 1 of the License Application may be another company, not an individual. Meaning the company applying for this license is owned by a parent company(ies), and in which case, you will complete Part B below and provide the parent company's contact information in Section 2.

A INDIVIDUAL

1. Legal Name of Principal *(legal name as it appears on your state issued ID)*

First Name: Suffix:

Middle Name:

Last Name:

2. Identifying Information of Individual

a. Social Security Number *(US citizen)*:

or ITIN or USCIS Number *(if non-US citizen, is a US resident)*:

b. Date of Birth: c. State Issued ID #: d. State of Issuance:

B BUSINESS *(complete this subsection only if Principal is a parent company of Applicant)*

1. Legal Business Name of Principal

Name:

2. Identifying Information of Business

Tax ID/EIN of Business:

Louisiana Secretary of State Charter Number *(if registered)*:

2 CONTACT INFORMATION FOR PRINCIPAL

A Mailing Address of Principal *(address to appear on certificate)*

P.O. Box or Street Address:

City: State: Zip:

B Physical Address of Principal

Street Name and Number:

City: State: Zip:

C Phone Numbers of Principal

Work: Cell: Fax:

D Email Address of Principal

Email:

3 LEGAL QUESTIONS FOR PRINCIPAL

A Have you or any firm in which you were a principal ever been debarred or disqualified by any public entity? ☐ Yes ☐ No

*If **YES**,* provide a detailed explanation including date, reason for debarment or disqualification, and name of the public entity.

B Have you ever been denied a license/registration or had a license/registration suspended or revoked by a government agency, occupational or professional licensing board in Louisiana or any other state? ☐ Yes ☐ No

*If **YES**,* provide a detailed explanation, including date, reason for denial, suspension or revocation, and the name of the agency or board.

C Do you have an outstanding notice of child support delinquency which has not been resolved? ☐ Yes ☐ No

"Resolved" means you are now current with your child support payments or have entered into a payment plan, which is also current.

D Have you ever filed bankruptcy as an individual or under any firm name whatsoever in Louisiana or in any other state (within the last ten years)? ☐ Yes ☐ No

*If **YES**,* provide copies of records showing the chapter filed, the initial debts submitted (including all creditors and the amount remaining owed each), and a discharge summary. For bankruptcies discharged over ten years ago, send only a copy of the discharge summary.

E Are there now any liens, judgments, or attachments pending or recorded against you, or against any firm in which you had interest at the time such indebtedness was created, or against any property involved under any of your contracts arising out of your previous operations in ANY state? ☐ Yes ☐ No

*If **YES,** provide a certificate of release or a payment plan, along with a statement from the legal agency showing that the plan is current.*

F Has the Applicant ever been **charged** or **arrested** for any criminal charge or offense in any jurisdiction? This shall include all DWI/DUI convictions; however, minor traffic violations need not be included. ☐ Yes ☐ No

*If **YES**,* provide details for each action, including date, charge/offense, name of law enforcement agency, and disposition (final outcome of arrest or prosecution). ***(Use a separate sheet if additional space is needed.)***

4 CONDITIONS FOR PRINCIPAL

Instructions: The principal must read and initial next to each statement and then print and sign their name below.

Initials	Statements
	1. I certify under penalty of perjury under the laws of the State of Louisiana that all statements, answers and representations on this application are true and accurate, and I acknowledge that any purposeful false information submitted on behalf of myself, verified by this signature, is cause to have license denied or revoked by the Louisiana Uniform Construction Code Commission.
	2. In accordance with La. R.S. 37:3746(A)(3), I understand that it is the responsibility of the licensed **Private Inspector** to maintain any certifications and/or license from an outside agency or organization that is required for the classifications held by the Private Inspector, and failure to maintain required certifications and/or licenses may result in the suspension of the Private Inspector's license and/or classifications held.
	3. In accordance with La. R.S. 37:3746(A)(2), I understand that LUCCC will use the email address provided as official means of communication. I also acknowledge and understand that I will monitor the email address provided for official correspondence from the commission.
	4. In accordance with La. R.S. 37:3746(A)(4), I understand that any changes to my mailing address and/or email address must be updated with LUCCC within 30 days of the change.
	5. I hereby agree to comply with all Louisiana Uniform Construction Code Commission statutes provided under La. R.S. 37:3727-3750 and LAC 55:VI. Chapters 5-13. I understand that the Louisiana Uniform Construction Code Commission shall take action to issue fines and penalties, and/or suspend or revoke the license for any violation of the laws and Rules and Regulations governing the licensure of public inspectors, private inspectors, and public inspector companies in Louisiana.
	6. I understand that any employee that requests to be attached to the company as a licensed private inspector with LUCCC must be principal or W2 employee, as defined under La. R.S. 37:3728(A), of the company. I also understand that I may be required to provide evidence of such eligibility by furnishing evidence satisfactory to the Commission of their employment with the business, if so requested by the Commission.
	7. In accordance with La. La. R.S. 37:3746(A)(4), I understand that I must notify LUCCC in writing if an employee attached to the company's license with LUCCC leaves employment and/or is no longer affiliated with the company within 30 days of the disassociation.

By signing my name as a Principal of the Applicant below, I am affirming all statements made within this sub-application.

_____ _____

Print Name of Principal | Name of Company

_____ _____

Signature of a Principal | Date