



WASHINGTON ASSOCIATION OF BUILDING OFFICIALS
SPECIAL INSPECTION REGISTRATION PROGRAM

KEY PERSONNEL TRANSFER APPLICATION

DIRECTIONS: Please answer all questions thoroughly. Type or print all responses. Refer to WABO Standard No. 1701 for detailed application prerequisites. Submit a separate application for each position applied for.

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: \$67.00 PER KEY PERSONNEL CERTIFICATE

MAKE CHECKS PAYABLE TO: WABO

KEY PERSONNEL TRANSFER

Key personnel holding a current certificate of registration with a registered special inspection agency may transfer that certificate of registration to another agency 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 Transfer Registration Application along with the prescribed fees; and
3. They submit their current, unexpired WABO Key Personnel Certificate of Registration.



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KEY PERSONNEL TRANSFER APPLICATION

APPLICATION FEE: \$67.00 PER CERTIFICATE OF REGISTRATION

MAKE CHECKS PAYABLE TO: WABO

1. APPLICATION INFORMATION

Application For: _____ Technical Director (**\$67.00**)
 _____ Supervising Laboratory Technician (**\$67.00**)
 _____ Special Inspection Field Supervisor (**\$67.00**)

Applicant Name: _____
 Last First MI

Home Address: _____
 Number and Street

_____ City State Zip Code

Phone No.: _____ Email: _____

TRANSFERRING FROM

_____ Previous Agency Name Location

Phone No.: _____ Email: _____

TRANSFERRING TO

_____ Current Agency Name Location

Phone No.: _____ Email: _____

Agency Physical Address: _____
 Number and Street

_____ City State Zip Code

Agency Mailing Address: _____
 Number and Street

_____ City State Zip Code

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:

- | | | | |
|--------------------------|------------------------------------|--------------------------|---|
| <input type="checkbox"/> | Reinforced Concrete (RC)* | <input type="checkbox"/> | Spray-Applied Fire-Resistive Materials (FP) |
| <input type="checkbox"/> | Prestressed Concrete (PC)** | <input type="checkbox"/> | Structural Wood (SWD) |
| <input type="checkbox"/> | Shotcrete (SC)** | <input type="checkbox"/> | Mass Timber Endorsement (MT)*** |
| <input type="checkbox"/> | Structural Masonry (SM) | <input type="checkbox"/> | Cold-Formed Steel Framing (CF) |
| <input type="checkbox"/> | Structural Steel and Bolting (SSB) | <input type="checkbox"/> | Post-Installed Anchors (PA) |
| <input type="checkbox"/> | Structural Welding (SW) | <input type="checkbox"/> | Fire-Resistant Penetrations and Joints (FS) |

* 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. INFORMATION ACCURACY CERTIFICATION AND INQUIRY CONSENT

I certify that all statements, answers, and information given as a part this application process are accurate to the best of my knowledge. I understand that giving false and/or misleading information may be cause for rejection of this application or revocation of subsequent registration as a special inspection agency.

I consent and authorize representatives of the Washington Association of Building Officials to request any information concerning my previous employment, education, military service or other information pertinent to this application.

Signature of Applicant

Date

Print Name