

Department of Inspections, Appeals, & Licensing

### **Building & Construction** Division

**Building Code Bureau** 

Application for Certification Manufactured Home Installer

Official use only Yes 🗆 No 🗆 Fee submitted Training Completed Yes 🗆 No Passing Test Score Yes □ No□ Certification #

Persons installing manufactured homes in lowa on or after July 1, 2008, are required to be certified by the State of Iowa Building Code Bureau, in compliance with Iowa Administrative Code.

	Applicant Information	
Name Address		_
City	State Zip Code	_
E-Mail		
Employer Name Address		_
City	State Zip Code	_

### **Requirements for Installer Certification**

An applicant for certification must meet all of the following:

- a. Must be at least eighteen years old.
- b. Must have a minimum of one year experience in the installation, construction or inspection of manufactured homes. Work experience affidavit must be attached.
- c. Must successfully complete a minimum of eight (8) hours of training approved by the State Building Code Commissioner.
- d. Must have received a passing grade on an examination approved by the State Building Code Commissioner.

## **Certification Period and Fee**

Installer certification and recertification shall be issued for three (3) years and shall expire on June 30th of the third year of the certification period. Certifications issued after July 1<sup>st</sup> will cover the remainder of the fiscal year in which they are issued and the following two fiscal years. The fee shall be three hundred dollars (\$300) payable at the time of application. Checks should be made payable to: Building Code Bureau Iowa Department of Inspections, Appeals & Licensing.

Please submit this application along with a copy of test results and training completion certificate. Mail with payment to: Manufactured Housing Program **Building Code Bureau** 6200 Park Ave, Suite 100 Des Moines, IA 50321

## STATE OF IOWA BUILDING CODE BUREAU

# AFFIDAVIT OF WORK EXPERIENCE MANUFACTURED HOUSING

I hereby state that on or before July 1, 2008, I have accumulated at least one year of work experience either constructing, installing or inspecting Manufactured Housing. I also attest that I am at least eighteen years of age as required by administrative rule.

I understand that this affidavit is to be filed with the State Building Code Bureau in conjunction with an application for certification as a Manufactured Housing Installer.

All statements contained herein are true and correct to the best of my knowledge. I understand that false or incorrect information provided by me in this affidavit or in my application for certification may result in the denial of application or cancellation of certification, and may also subject me to civil and criminal proceedings.

I understand that I may be required to provide additional information in support of this affidavit, and agree that all information in this affidavit and in my application may be verified and investigated.

Print Name of Person Signing Affidavit

Signature of Person Signing Affidavit

Date