



# TEXAS DEPARTMENT OF LICENSING & REGULATION

P.O. Box 12157 • Austin, Texas 78711-2157

[www.tdlr.texas.gov](http://www.tdlr.texas.gov)

## CODE ENFORCEMENT OFFICER RENEWAL REGISTRATION APPLICATION INSTRUCTIONS

**DOCUMENTS SUBMITTED WITH YOUR APPLICATION WILL NOT BE RETURNED. KEEP A COPY OF YOUR COMPLETED APPLICATION, ALL ATTACHMENTS, AND YOUR CHECK OR MONEY ORDER. DO NOT SEND CASH.**

1. **NAME** – Provide your legal name in the spaces provided. (Last Name, First Name, Middle Name, Suffix) Examples of a suffix include Jr., Sr., and II. (Mr. is not a suffix.)
2. **REGISTRATION NUMBER AND EXPIRATION DATE** – Provide your registration number and the date it expires.
3. **DATE OF BIRTH** – Provide your birthdate.
4. **SOCIAL SECURITY NUMBER** – Social security number disclosure is required by Section 231.302(c)(1) of the Texas Family Code to obtain a license. Your social security number is subject to disclosure to an agency authorized to assist in the collection of child support payments. For more information regarding child support payments, contact the [Texas Attorney Office](#) or call (512) 460-6000 or (800) 252-8014.
5. **EMAIL ADDRESS** – Provide your email address only if you agree to the following statement. By providing my email address I authorize the Texas Department of Licensing and Regulation (TDLR) to send licensing communications and required notices to me by electronic mail. I understand that I may revoke this authorization in writing and that I must update my email address, or I will not receive these notices. I understand that the email address I have provided in this application will remain confidential except as permitted or required by law.
6. **PERSONAL PHONE NUMBER** – Provide a telephone number, including the area code, where we can reach you during the day. This may be your office phone number where we can leave a message.
7. **MAILING ADDRESS** – Provide your current residential mailing address. This is the address where we will send you mail. This address can be a post office box. You can add the zip plus-4 to help the postal service deliver mail more efficiently and accurately.
8. **EMPLOYMENT INFORMATION** – Provide the employer's business information, your job title and date you began working for your employer. Also, place a check in the box representing the type of work you spend most of your time doing.
9. **CONTINUING EDUCATION** – Each registered code enforcement officer must complete at least twelve continuing education hours as set forth in this section within the 24 months preceding renewal of a registration, at least one hour of which must be in legal or legislative issues.
10. **CRIMINAL HISTORY** – Indicate if you have ever been convicted of or placed on deferred adjudication for any Misdemeanor or Felony, other than a minor traffic violation. If YES, complete and attach a [Criminal History Questionnaire \(PDF\)](#) for each offense.
11. **STATEMENT OF APPLICANT** – Carefully read the statement before dating and signing your application.

### **RENEWAL FEES**

**\$75.00** If your renewing prior to your expiration date.

**\$112.50** If your registration has been expired for 90 days or less.

**\$150.00** If your registration has been expired for more than 90 days but less than 18 months.

### **SEND YOUR COMPLETED APPLICATION AND REQUIRED DOCUMENTS TO:**

TDLR  
P.O. Box 12157  
Austin, TX 78711-2157

Documents submitted with your application will not be returned. Keep a copy of your completed application, all attachments, and your check or money order. Do not send cash.

For additional information and questions, please visit the [TDLR website](#). You may request assistance or submit required attachments via [TDLR webform](#) or Fax (512) 475-2871. You may contact Customer Service Representatives by calling (800) 803-9202 [in state only], or (512) 463-6599; Relay Texas-TDD: (800) 735-2989. Customer Service Representatives are available Monday through Friday (excluding holidays).



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## CODE ENFORCEMENT OFFICER RENEWAL REGISTRATION APPLICATION

### RENEWAL APPLICATION FEES (FEE IS NON-REFUNDABLE)

\$75.00 – IF YOUR RENEWING PRIOR TO EXPIRATION DATE

\$112.50 – IF YOUR REGISTRATION HAS BEEN EXPIRED FOR 90 DAYS OR LESS

\$150.00 – IF YOUR REGISTRATION HAS BEEN EXPIRED FOR MORE THAN 90 DAYS BUT LESS THAN 18 MONTHS

This completed form must be accompanied by all required documents and the application fee.

#### 1. Name:

\_\_\_\_\_  
Last First Middle Suffix

#### 2. Registration Number:

\_\_\_\_\_

#### Expiration Date:

\_\_\_\_\_  
Month/Day/Year

#### 3. Date of Birth:

\_\_\_\_\_  
Month/Day/Year

#### 4. Social Security Number:

\_\_\_\_\_ See Instruction Sheet for Disclosure Information

#### 5. Email Address:

\_\_\_\_\_  
Ex: [johndoe@gmail.com](mailto:johndoe@gmail.com) (See Instruction Sheet for Disclosure Information)

#### 6. Personal Phone Number:

\_\_\_\_\_  
(Area Code) Phone Number

#### 7. Mailing Address:

\_\_\_\_\_  
P.O. Box, Number, Street Name/Apartment Number, City, State, Zip Code

### 8. EMPLOYMENT INFORMATION

#### Employer's Business Name:

#### Employer's Business Mailing Address:

\_\_\_\_\_  
P.O. Box, Number, Street Name/Apartment Number, City, State, Zip Code

#### Employer's Business Phone Number:

\_\_\_\_\_  
(Area Code) Phone Number

#### Employer's Business Fax Number:

\_\_\_\_\_  
(Area Code) Phone Number

#### Job Title:

\_\_\_\_\_

#### Date of Employment From:

\_\_\_\_\_  
Month/Year To: Present

#### Category of employment which you spend most of your time: (Select one box)

- |   |   |
|---|---|
| <input type="checkbox"/> Not Employed                 | <input type="checkbox"/> Nuisance Violations    |
| <input type="checkbox"/> Zoning Ordinances            | <input type="checkbox"/> Abandoned Vehicles     |
| <input type="checkbox"/> Sign Ordinances              | <input type="checkbox"/> Junk Vehicles          |
| <input type="checkbox"/> Home Occupations             | <input type="checkbox"/> Health Ordinances      |
| <input type="checkbox"/> Housing Codes and Ordinances | <input type="checkbox"/> Basic Processes of Law |
| <input type="checkbox"/> Building Abatement           | <input type="checkbox"/> Other: (specify) _____ |

**9. Did you complete the required 12 hours of approved continuing education?**

Yes  No

Note: Renewal registration applicants may be audited in accordance with 62.24(l) which requires documentation of CE completion.

**10. Have you ever been convicted of, or placed on deferred adjudication for, any misdemeanor or felony, other than a minor traffic violation since your last renewal?**

Yes  No

If **YES**, complete and submit a Criminal History Questionnaire (PDF) for each offense.

**11. STATEMENT OF APPLICANT**

I certify that I have read and will comply with all applicable provisions of the Code Enforcement Officers Act, Texas Occupations Code, Chapter 1952; Texas Occupations Code, Chapter 51; and 16 Texas Administrative Code, Chapter 62. I understand that providing false information on this application may result in denial of this application and/or revocation of the license I am requesting and the imposition of administrative penalties.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date



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## CODE ENFORCEMENT OFFICER STATEMENT OF CONTINUING EDUCATION

You must return this form with your renewal form and fee.

1. Rule §62.24. Each registered code enforcement officer must obtain and show proof of at least 12 continuing education hours within the 24 months preceding renewal of a registration. At least one hour must be legal/legislative issues.
2. Each registered code enforcement officer in training must obtain and show proof of at least six continuing education hours within the 12 months preceding renewal of a registration. At least one hour must be in legal/legislative issues.
3. Each registrant is responsible for maintaining a record of his/her continuing education activities.
4. In the spaces provided below, list the continuing education (CE) activities which you have attended or completed. If you do not meet the requirements set out above, you may not renew your registration. CE credit is limited to the topics set out in Rule §62.24(i).

**Name:** (Please Print)

**Registration Number:**

\_\_\_\_\_  
Last, First, Middle Name, Suffix (Jr., Sr., III)

Course Name	Sponsor	Date Completed	# of Credit Hours
<b>Total Number of Hours</b>			

I certify that I completed the above-listed activities on the dates indicated for the number of credit hours specified. I understand that the Code Enforcement Officer Registration Program randomly audits renewal applications, and that my application may be selected for audit. I understand that knowingly providing false information of any kind could result in the revocation or suspension of my registration. I certify that all the above is true and correct.

\_\_\_\_\_  
Signature of Renewal Applicant

\_\_\_\_\_  
Date