TEXAS DEPARTMENT OF LICENSING AND REGULATION

Regulatory Program Management/Industrialized Housing & Buildings Program

P. O. Box 12157 • Austin, Texas 78711 • (512) 539-5735 • (800) 803-9202 • Fax (512) 539-5736

Email Address: IHBTech@tdlr.texas.gov *Internet Address:* www.tdlr.texas.gov

APPLICATION FOR REGISTRATION

Design Review Agencies and Third Party Inspection Agencies

Pursuant to the Texas Occupations Code, Chapter 1202, Industrialized Housing and Buildings

Receipt Number	Fee Amount	Payment Amount
	Design Review Agency - $300.00 **Third Party Inspection Agency - $150.00**	

A Separate Application Must be Submitted for Each Registration

DO NOT WRITE ABOVE THIS LINE

PLEASE TYPE OR PRINT

1. Name of Business to Be Licensed:		
2. *Email Address (not required):	**3.** Contact Name: (required)	
4. Physical Mailing Address:	**5.** County:	
6. Phone Number:	**7.** Fax Number:	**8.** Business Type (check one): ☐ Corporation ☐ Partnership ☐ Sole Proprietor ☐ LLC
9. **Federal Tax ID Number:		**10.** Birth Date (Sole Proprietor Only):

***** The Department will add your address to the IHB email notification list, which automatically provides information from the Department on matters affecting the IHB program. Your email address is confidential pursuant to the Texas Public Information Act and the Department will not share it with the public. See additional information at the following link: http://www.license.state.tx.us/newsletters/TDLRnotificationLists.asp

**** The 11-digit Comptroller's Taxpayer Number, the 9-digit Federal Employer's Identification Number, or if sole proprietor, your social security number.** The Social Security number disclosure is required by Section 231.302(c)(1) of the Texas Family Code in order to obtain a registration. 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 General at (512) 460-6000 or (800) 252-8014.

11. Check the registration fee that applies (for new applications only):

☐ **Design Review Agency - $300 Registration Fee** ☐ **Third Party Inspection Agency - $150 Registration Fee**

12. List Corporate Officers or Partners. List the name, title, birth date and percentage of ownership for each (attach an additional sheet if necessary). Signature of applicant on back of form must be one of the people listed here.

NAME (full name)	Title	% of Ownership (Partnerships only)

13. Did you attach documentation to show compliance with criteria for approval in Department rule 70.22 (for design review agency) or Department rule 70.23 (for third party inspection agency)? Documentation becomes part of the application. ☐ YES ☐ NO

I certify that I have read the Occupations Code, Chapter 1202, and the current Department of Licensing and Regulation rules promulgated thereunder. If the registration is issued, I agree to furnish to the Department of Licensing and Regulation any changes in information on this form and in all documents submitted as part of this application within TEN (10) DAYS of the change.

Registration is subject to revocation if the Department is not notified, in writing, of any changes in the information given on this application or if there is a rule or law violation.

With knowledge of the penalties for false statements, I certify that I believe all information submitted on this application and on all attached documents is true and correct.

For partnership the applicant's signature must be a managing partner. For a corporation the applicant's signature must be an officer of the corporation.

Applicant's Printed Name	Signature of Applicant	Date