



APPLICATION BOOKLET

Council-certified
Residential Mold Inspector

CRMI

INSTRUCTIONS:

Candidates for the CRMI must complete **three tasks** in order to become certified by the American Council for Accredited Certification:

- 1) Submit an eligible application (typed or neatly printed)
- 2) Pass the CRMI examination with a score of 75% or better
- 3) Await board review of the completed application

Task #1: The application packet

This booklet contains all the information and forms necessary for the first task: completion of the application packet. In order to apply, please take the following steps:

1. _____ Determine your eligibility by reading the program description (www.acac.org/forms/applications/crmidescription.pdf)
2. _____ Complete, sign and notarize this application form.
3. _____ Attach copies of college transcripts if you claim college credit as part of your application.
4. _____ Attach at least one form of project documentation for EACH year of field experience claimed (see "Required Documentation" on page 4).
5. _____ Attach the application fee (credit card payments are also accepted in the Council office via phone or fax).

Task #2: The CRMI examination

Once your completed application (including payment) is on file with the Council office, you may register for the CRMI exam by calling (888) 808-8381. The Council staff will assist you in selecting a testing center near you. For an updated list of exam topics and item references to use in test preparation, visit www.acac.org.

Task #3: Board review

Following a successful examination, the Council staff forwards the complete, eligible application to the CRMI certification board. You will be notified within approximately two weeks after the board reviews your application.

NOTE: IT IS THE CANDIDATE'S RESPONSIBILITY TO ENSURE THAT HIS OR HER APPLICATION IS COMPLETE AND ELIGIBLE. Incomplete files will not be forwarded to the board for review. Please call the Council if you need assistance in determining your eligibility or in completing the application packet.



OFFICIAL APPLICATION
 Council-certified
 Residential Mold Inspector

CRMI

Mail completed applications to The American Council for Accredited Certification, PO Box 11599
 Glendale, AZ 85318-1599. Each packet must include:

- A signed, notarized application form.
- At least one of the following for EACH year of field experience:
 - a. A notarized reference form signed by a professional attesting to the candidate’s work as a home inspector.
 - b. Dated signature page from a contract to perform a home inspection that names the applicant as the inspector.
 - c. One page of a home inspection report that includes the location and date of inspection and names the applicant.
- A check or money order for the application fee. (Credit card payments accepted by phone)

| Staff Use Only | |
|----------------|------|
| Received by | Date |
| Verified by | Date |
| Verified by | Date |
| Verified by | Date |
| Verified by | Date |

The CRMI Certification Board will treat the information in this application as confidential.

CONTACT INFORMATION

Full Name: _____

Complete Home Address: _____

Home Phone: _____

Email Address: _____

Last 4 Digits of SSN: _____

Professional Title: _____

Company Name: _____

Complete Business Address: _____

Business Phone: _____

Business FAX: _____

Company URL: _____

Address for Correspondence:

_____ Home

_____ Business

Prep Course Provider: _____

Prep Course Site and Date: _____

Licenses and Designations:

Please list or describe any professional designations, licenses or registrations currently held, including home inspector or pest control operator license numbers.

ELIGIBILITY

The CRMI requires a combined two (2) years of post secondary science-related education and relevant field experience. Education should include disciplines related to Indoor Air Quality. Experience must include home inspections for the purpose of property transfer. Current Council certificate holders are also eligible.

EDUCATION

High School/GED: _____ College/University: _____
City and State: _____ City and State: _____
Year of Graduation: _____ Degree and Year: _____
Major: _____

YEARS OF IAQ FIELD EXPERIENCE: _____

Please briefly describe your field experience as a home inspector or licensed pest control inspector or as a Council-certified professional.

AFFIDAVIT: By signing this application, I make the following statements:

- I am aware of and abide by all local, state and Federal regulations governing asbestos, lead and other hazardous materials.
- I agree to comply with the ACAC code of conduct and pledge myself to the highest ethical standards.
- I agree to restrict my use of the CRMI to the activities for which certification has been granted.
- I agree to refrain from using the CRMI in such a manner as to bring the ACAC into disrepute.
- I agree to refrain from making any statements regarding the CRMI which the ACAC may consider misleading or unauthorized.
- I agree to refrain from using the CRMI in a misleading manner.
- I understand that the CRMI certificate remains the property of the ACAC.
- I agree to discontinue the use of all claims to the certification in the event that it is suspended or withdrawn and to return the CRMI certificate promptly to the ACAC.
- I understand that the application fee is non-refundable.
- I agree to indemnify and hold harmless the ACAC and all its agents and employees from and against any liability whatsoever in connection with this application, the CRMI examination and/or the granting of or failure to grant certification.

Applicant Signature: _____ **Date:** _____

Notary Public: _____ **Expiration Date:** _____

Notary Seal/Stamp: _____ **Date:** _____

Incomplete application packets will not be forwarded to the Board for review.



PROFESSIONAL REFERENCE FORM

American Council for Accredited Certification

I understand that _____ (the CANDIDATE) is applying to the American Council for Accredited Certification for the following certification:

Council-certified Residential Mold Inspector (CRMI)

I understand that this certification is designed for home inspectors or licensed pest control inspectors performing residential structural inspections for purposes of property transfer. I further understand that this reference will be relied upon to verify field experience necessary for certification by the American Council for Accredited Certification.

I hereby attest that, to the best of my knowledge, the Candidate worked as a home inspector or licensed pest control inspector according to the above definition during the year _____.

I understand that this information will be treated as confidential by the American Council for Accredited Certification.

Supervisor or Employer Signature

Date

Full Name

Company and Title

Phone

email

Notary Public

Date

Notary seal or stamp:



PROFESSIONAL REFERENCE FORM

American Council for Accredited Certification

I understand that _____ (the CANDIDATE) is applying to the American Council for Accredited Certification for the following certification:

Council-certified Residential Mold Inspector

I understand that this certification is designed for home inspectors or licensed pest control inspectors performing residential structural inspections for purposes of property transfer. I further understand that this reference will be relied upon to verify field experience necessary for certification by the American Council for Accredited Certification.

I hereby attest that, to the best of my knowledge, the Candidate worked as a home inspector or licensed pest control inspector according to the above definition during the year _____.

I understand that this information will be treated as confidential by the American Council for Accredited Certification.

Signature _____ Date _____

Full Name _____

Company and Title _____

Phone _____ email _____

Notary Public _____ Date _____

Notary seal or stamp: