

NORTH CAROLINA CODE OFFICIALS QUALIFICATION BOARD

1202 Mail Service Center
Raleigh, NC 27699-1202
Phone (919) 661-5880 / Fax (919) 661-3193
Please email this form to: terri.tart@ncdoi.gov

CERTIFICATION OF EMPLOYMENT

Name of City or County Jurisdiction _____ J# _____ Jurisdiction ID # _____ County _____

Code Enforcement Official (CEO)

Is this the Primary Jurisdiction for this CEO? (check here) []
Is this the Secondary Jurisdiction for this CEO? (check here) []
Will this be a Contract basis only for this CEO? (check here) []

COMPLETE THIS SECTION ONLY IF CEO HAS LEFT EMPLOYMENT WITH A MUNICIPALITY.
If CEO is reactivating his/her certificate (s) please list the date he/she left employment with his/her last Jurisdiction.
This form will not be processed if a date is needed.
Date Left Employment: _____

The following "code enforcement official(s)" [as defined by G. S. 143-151.8(a)(3) and (a)(5)] have been hired or are under contract by this City or County to provide code enforcement as certified below

Table with columns: NAME, CEO ID #, DATE APPOINTED IN TRADE, TRADE AREA(S) OF INSPECTION RESPONSIBILITY. Check the appropriate area. Rows include checkboxes for Bldg, Elec, Mech, Plbg, Fire.

I understand that the certificate issued by the Board will become invalid if the code enforcement official(s) listed above fails within two years to complete the training required under the Board's Rules and Regulations.

Signature _____
Certifying City or County Official (Mgr., Clerk, Dir. of Insp., etc.)
Printed Name _____
Certifying City or County Official (Mgr., Clerk, Dir. of Insp., etc.)

Date: _____
Phone: _____
Email: _____

STATE OF NORTH CAROLINA

COUNTY OF _____

The above named certifying city or county official personally appeared before me on this day who, being duly sworn, deposes and says that the above statement is true and correct.

This, the _____ day of _____, 20_____

(Seal)

Printed Name of Notary Public _____

My commission expires: _____

Signature of Notary Public _____