



Arkansas Home Inspector Registration Board

900 W. Capitol Ave. Ste. 400

Little Rock, AR 72201

Tel: (501) 683-3710

COMPLETED MENTORED INSPECTION FOR AHIRB APPLICANT

This form is to be completed after the mentored inspection and signed by both parties.

** All printing shall be readable/legible

Date of Inspection: / /
mm/dd/yyyy

Physical Address & City of Inspection: _____
Street Address *City*

Inspection: (circle one) #1 #2 #3

Type of Inspection: (circle one) ATTIC CRAWLSPACE REPORT WRITING

Hours Completed: _____

Applicant Signature: _____
***Print Name* *Signature*

Mentor Signature: _____
***Print Name* *Signature*

Mentor License No.: HI- _____

Mentor: Email this completed form to AHIRB at ahib@arkansas.gov

*** Liability release: As all home inspections completed during the period of apprenticeship are done so under the signature of the licensed home inspector, any concerns regarding liability and the need for any additional liability coverage is the sole responsibility of the licensee and apprentice. The Board would highly recommend any such discussions regarding liability be addressed prior to any on-site inspections including the apprentice.