

Inspector Candidate

0243

U.S. Department of Housing

OMB No. 2577-

Assessment Questionnaire-HFA

and Urban Development

(exp. 05/31/2018)

Office of Public and Indian Housing -

Real Estate Assessment Center (PIH-REAC)

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Privacy Act Information: This collection is authorized by the U.S. Housing Act of 1937 (42 U.S.C. 1437 et seq.). Each inspector candidate (individual) must submit information to HUD for HUD to establish the composition of the training course and certify as UPCS inspectors those individuals who successfully complete the entire training program and provide them with a unique personal ID. This collection is voluntary, but it is required if an individual seeks to obtain and retain the benefits of a HUD UPCS inspector.

Last name:	Middle name/initial:	First name:	Home phone number:	Work phone number:
Street address:		Apartment number:	Cell phone number:	(Independent User ID or MID)
City:			State:	Zip code:
Primary e-mail address:				
You will be contacted via e-mail. If this e-mail address or any of the above information changes, please notify PIH-REAC at Inspector_Assessment_Form@hud.gov .				

The following questionnaire provides HUD with basic background information of your inspection skills, knowledge and abilities. You may be required to provide verifiable documentation of your answers.

Warning: False information is grounds for decertifying you or for decertifying you after you begin work. Moreover, any person who knowingly presents a false, fictitious, or fraudulent statement or claim in a matter within the jurisdiction of the U.S. Department of Housing and Urban Development is subject to criminal penalties, civil liability, and administrative sanctions.

Inspection Experience

I have completed the following number of commercial and/or residential inspections, in which I was solely responsible for conducting the inspection. At the conclusion of the inspection, I was required to independently document the finding(s) in a written report. During the inspection, I was required to assess the physical condition of the building and building systems, including the roof, foundation, exterior walls, interior walls, electrical systems, mechanical systems, and all other items associated with a multifamily commercial building. (This does not include termite inspections, appraisals, and site visits from property owners, managers, or real estate brokers.)

Choose only ONE response.

- 0 – 49 inspections
 50 – 125 inspections
 126 – 249 inspections
 250 – 349 inspections
 350 – 499 inspections
 500+ inspections

Education

I have the following level of education.

Choose only ONE response.

- I do not have a high school diploma or equivalent.
- High school diploma or equivalent
- Associate's Degree
- Bachelor's Degree
- Master's Degree

Specialized Training

I have completed the following number of hours of formal inspection training in a certified training program.

Choose only ONE response.

- I do not have formal inspection training from a certified training academy.
- 1 – 19 hours
- 20 – 39 hours
- 40 – 79 hours
- 80+ hours

Computer Skills

When using e-mail, which of the following activities can you perform without the assistance of another individual?

Select ALL that apply.

- Never used e-mail/cannot perform any of the tasks listed below without assistance.
- Send and receive messages.
- Send an attached document with an e-mail.
- Receive and save an attached document.
- Access my e-mail on a computer other than my primary computer.

When using the Internet, which of the following activities can you perform without the assistance of another individual?

Select ALL that apply.

- Never used the Internet/cannot perform any of the tasks below without assistance.
- Access a web site.
- Search using a search engine tool.
- Submit information to a web site (e.g., upload a file, purchase merchandise, fill out an online survey, conduct banking, etc.).
- Download files and save them to a specific location on the computer.

When it comes to using a computer, which of the following activities can you perform without the assistance of another individual?

Select ALL that apply.

- Never used a computer/cannot perform any of the tasks below without assistance.
- Navigate in different folders.
- Open and use multiple software applications at a time.
- Create, copy, move, rename, and delete files and folders.
- Install new software.

I have the following experience using a computer to conduct inspections.

Choose only ONE response.

- I have not used a computer to conduct an inspection.
- I have conducted an inspection using an inspection report form, input the data into a computer upon completion of the inspection, and printed a final report.
- I have conducted an inspection using a hand-held device while on-site and printed a final report.
- I have downloaded inspection data from the Internet, conducted the inspection using a hand-held device, input observations into the inspection software while on-site, and uploaded the completed inspection to the provider.

Technical Knowledge in Commercial and Residential Building Trades

Please read the following list of major building trades used in commercial and residential construction, and mark those in which you have technical knowledge.

Select ALL that apply.

- I do not have technical knowledge in any of the building trades listed below.
- Carpentry
- Electrical (e.g., elevators, emergency power)
- HVAC (e.g., boilers, radiant heaters, air handlers, building exhausts)
- Masonry
- Plumbing

Related Information

Please read the following and mark those that describe you and your experience.

Select ALL that apply.

- I am a member of a professional society of inspectors.
- I have a commercial and/or residential builder's license.
- I have been the manager of a property and conducted inspections.
- I have been part of the maintenance personnel of a property and conducted inspections.
- I am currently a building inspector for a state or municipality.
- None of the above applies.

Certification

I certify that, to the best of my knowledge and belief, all of the information that I have provided with the submission of this Inspector Candidate Assessment Questionnaire is true, correct, complete, and made in good faith. I further certify that I have read and understand all of the information posted, including the description of the Uniform Physical Condition Standards (UPCS) and inspection protocol, and the requirements to successfully complete all aspects of the required training. I understand that any information I give may be verified for purposes of determining eligibility. I consent to the release of information about my ability and fitness by employers, schools, law enforcements agencies and other individuals and organizations to authorized representatives of the Federal Government.

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TYPE INSPECTOR CANDIDATE FULL NAME

DATE