

## Application for Appointment as a Qualified Inspector Form AQI-1

The information collected on this form is required under Texas Insurance Code Sections 2210.251-2210.2581 and 28 Texas Administrative Code Section 5.4609.

► **Part 1: Personal information**

Full name \_\_\_\_\_

Title or position \_\_\_\_\_ Employer \_\_\_\_\_

**Business address**

Street address or route \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

**Home address**

Street address or route \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

**Email address** \_\_\_\_\_

Which address would you like us to use for correspondence? (check one)     Business     Home

**Business phone** \_\_\_\_\_ **Home phone** \_\_\_\_\_

► **Part 2: Education and experience**

**Section A: Current Texas licensed professional engineer information**

Is your Texas professional license temporary or provisional? (check one)     Yes     No

Texas registration number \_\_\_\_\_ Field of expertise \_\_\_\_\_

Number of years \_\_\_\_\_ Number of months \_\_\_\_\_

**Section B: Education**

College or university	City, State	Course/Major	Degree earned

**Section C: TDI orientation**

Date attended TDI orientation \_\_\_\_\_

**Section D: Other education or training**

Course	Subject	Dates attended

**Section E: Experience in the design of structures to meet windstorm resistant building requirements**

1. Have you designed structures and calculated wind loads for structures in high wind areas?  Yes  No
2. What percentage of your work has been for the design of structures in high wind areas? \_\_\_\_\_
3. How long have you been designing structures in high wind areas? Years \_\_\_\_\_ months \_\_\_\_\_

**Section F: Signature**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Under Insurance Code Section 2210.256, if the commissioner finds that an appointed qualified inspector knowingly, willfully, fraudulently, or with gross negligence signed or caused to be prepared an inspection report that contains a false or fraudulent statement, the commissioner may, after notice and hearing, issue an order directing the appointee to pay a fine not to exceed \$5,000. Under Insurance Code Article 21.47, a person commits a felony offense if the person knowingly or intentionally makes, files, or uses any instrument in writing required to be made to or filed with the commissioner, either by the Insurance Code or by rule, when the instrument in writing contains any false, fictitious, or fraudulent statement or entry with regard to any material fact.

**Return application by mail or email**

**Mail:** Texas Department of Insurance  
Engineering Services Program  
PO Box 12030  
Austin, TX 78711-2030

**Email:** [Engineering@tdi.texas.gov](mailto:Engineering@tdi.texas.gov)

**Questions?**

For more information or questions, call 800-248-6032, option 5, or email [engineering@tdi.texas.gov](mailto:engineering@tdi.texas.gov).

**Your rights**

You can request information TDI has about you by emailing [OpenRecords@tdi.texas.gov](mailto:OpenRecords@tdi.texas.gov) or writing to: Public Information Coordinator, Texas Department of Insurance, PO Box 12030 (mail code GC-ORO) Austin, Texas 78711-2030. You also have the right to request TDI to correct information that is not accurate. To ask for a correction, send (1) your name, mailing address, and your phone number, (2) details about what needs to be corrected, and (3) the reason or proof showing why the information is incorrect. Send this by email to [RecordCorrections@tdi.texas.gov](mailto:RecordCorrections@tdi.texas.gov) or by mail to: Record Correction Request, Texas Department of Insurance, PO Box 12030 (mail code CO-AAL-CC), Austin, Texas 78711-2030.