



TEXAS DEPARTMENT OF LICENSING & REGULATION

P.O. Box 12157 • Austin, Texas 78711-2157

www.tdlr.texas.gov

CODE ENFORCEMENT OFFICER IN TRAINING RENEWAL REGISTRATION - APPLICATION INSTRUCTIONS

1. **NAME** – Provide your legal name in the spaces provided. (Last Name, First Name, Middle Name, Suffix) Examples of a suffix include Jr., Sr., and III. (Mr. is not a suffix.)
2. **REGISTRATION NUMBER AND EXPIRATION DATE** – Provide your registration number and the date it expires.
3. **DATE OF BIRTH** – Provide your birthdate.
4. **SOCIAL SECURITY NUMBER** – Social Security Number disclosure is required by Section 231.302(c)(1) of the Texas Family Code in order to obtain a license. Your Social Security Number is subject to disclosure to an agency authorized to assist in the collection of child support payments. For more information regarding child support payments, contact the [Texas Attorney General](#).
If you do not have a Social Security Number, you must complete the [Social Security Number Status Certification](#) form. See additional information at [Verification of Lawful Presence](#).
5. **EMAIL ADDRESS** – Provide your email address only if you agree to the following statement. By providing my email address I authorize the Texas Department of Licensing and Regulation (TDLR) to send licensing communications and required notices to me by electronic mail. I understand that I may revoke this authorization in writing and that I must update my email address, or I will not receive these notices. I understand that the email address I have provided in this application will remain confidential except as permitted or required by law.
6. **PERSONAL PHONE NUMBER** – Provide a telephone number, including the area code, where we can reach you during the day. This may be your office phone number where we can leave a message.
7. **MAILING ADDRESS** – Provide your current residential mailing address. This is the address where we will send you mail. This address can be a post office box. Add the zip plus-4 to help the postal service deliver mail more efficiently and accurately.
8. **CIT EMPLOYMENT INFORMATION** – Provide the employer's business information, your job title and date you began working for your employer. Also, place a check in the box representing the type of work you spend most of your time doing.
9. **CONTINUING EDUCATION** – Each registered code enforcement officer must complete at least six continuing education hours as set forth in this section within the 24 months preceding renewal of a registration, at least one hour of which must be in legal or legislative issues.
10. **CRIMINAL HISTORY** – Indicate if you have ever been convicted of or placed on deferred adjudication for any Misdemeanor or Felony, other than a minor traffic violation. If YES, complete and attach a [Criminal History Questionnaire \(PDF\)](#) for each offense.
11. **STATEMENT OF APPLICANT** – Carefully read the statement before signing and dating your application.

SEND YOUR COMPLETED APPLICATION AND REQUIRED DOCUMENTS TO:

TDLR
P.O. Box 12157
Austin, TX 78711-2157

Documents submitted with your application will not be returned. Keep a copy of your completed application, all attachments, and your check or money order. Do not send cash.

For additional information and questions, visit the [TDLR website](#) or reach Customer Service via [webform](#). The webform will allow you to submit your request for assistance and include attachments needed. Customer Service Representatives are available Monday through Friday (excluding holidays) at (800) 803-9202 (in state only), (512) 463-6599, or Relay Texas-TDD: (800) 735-2989.

TDLR PUBLIC INFORMATION ACT POLICY:

This document is subject to the Texas Public Information Act. With certain exceptions, information in this document may be made available to the public. For more information, view the [TDLR Public Information Act Policy](#).



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CODE ENFORCEMENT OFFICER IN TRAINING RENEWAL REGISTRATION - APPLICATION

RENEWAL APPLICATION FEES (FEE IS NON-REFUNDABLE)

\$50.00 – IF YOU ARE RENEWING PRIOR TO YOUR EXPIRATION DATE.

\$75.00 – IF YOUR REGISTRATION HAS BEEN EXPIRED FOR 90 DAYS OR LESS.

\$100.00 – IF YOUR REGISTRATION HAS BEEN EXPIRED FOR MORE THAN 90 DAYS BUT LESS THAN 18 MONTHS.

This completed application must be accompanied by all required documents and the application fee.

1. Name:

Last

First

Middle

Suffix

2. Registration Number:

Expiration Date:

MM/DD/YYYY

3. Date of Birth:

MM/DD/YYYY

4. Social Security Number:

See Instruction Sheet for Disclosure Information

5. Email Address:

Ex: johndoe@gmail.com (See Instruction Sheet for Disclosure Information)

6. Personal Phone Number:

(Area Code) Phone Number

7. Mailing Address:

P.O. Box, Number, Street Name/Apartment Number

City

State

Zip Code + 4

8. CODE ENFORCEMENT IN TRAINING EMPLOYMENT INFORMATION

Employer's Business Name:

Employer's Business Mailing Address:

P.O. Box, Number, Street Name/Apartment Number

City

State

Zip Code

Employer's Business Phone Number:

(Area Code) Phone Number

Job Title

Employment Start Date:

MM/YYYY

Employment End State:

MM/YYYY

Category of employment in which you spend most of your time: (Select one box)

- | | |
|------------------------------|------------------------|
| Not Employed | Nuisance Violations |
| Zoning Ordinances | Abandoned Vehicles |
| Sign Ordinances | Junk Vehicles |
| Home Occupations | Health Ordinances |
| Housing Codes and Ordinances | Basic Processes of Law |
| Building Abatement | Other: (specify) |

9. Did you complete the required six (6) hours of approved continuing education (CE)? Note: Renewal registration applicants may be audited in accordance with 16 TAC §62.24(I), which requires documentation of CE completion.	Yes No
10. Have you ever been convicted of, or placed on deferred adjudication for, any misdemeanor or felony, other than a minor traffic violation since your last renewal? If YES , complete and submit a Criminal History Questionnaire (PDF) for each offense.	Yes No
11. STATEMENT OF APPLICANT	
I certify that I have read and will comply with all applicable provisions of the Code Enforcement Officers Act, Texas Occupations Code, Chapter 1952; Texas Occupations Code, Chapter 51; 16 Texas Administrative Code, Chapter 60 and 16 Texas Administrative Code, Chapter 62. I understand that providing false information on this application may result in denial of this application and/or revocation of the license I am requesting and the imposition of administrative penalties.	
Signature of Applicant	Date