



National  
Organization of  
Remediators and  
Mold Inspectors

NORMI Certified Mold Inspector

# NORMI Certified Mold Inspector

## CMI

### Application for Accreditation

MAY BE FAXED TO 866.211.4324

NAME of Business

NAME of Applicant

Business Address

City

ST

ZIP

Business Telephone:

Business FAX:

Business eMail:

Business Cellular:

**PLEASE Check ONLY one**

- Currently Certified as a CMI with the following agency: \_\_\_\_\_
- Not yet certified but have three years (3 years) experience in the Mold Inspection industry in lieu of existing certification (letter of experience hereto attached)

***Attached to this application are the following documents***

- MAIL this application with a company check payable to **NORMI™**, with application for **\$400.00**
- Certificate of General Liability insurance endorsed to **NORMI™**, 22174 Prats Road, Abita Springs, LA 70420 NOTE: minimum limits may be required after review of experience
- Letter, on your letterhead, evidencing experience of two years (2 years) or three years (3 years) of experience if offered in lieu of an existing CMI Certification. Proctored exam may be required.
- Copy of existing CMA Certification, or comparable, from nationally recognized certifying agency.
- Pay By Credit Card **\$400.00**     VISA     MasterCard     Discover     AMEX

Card Number: \_\_\_\_\_  
 Expiration Date: \_\_\_/\_\_\_/\_\_\_    CVV (on back of credit card): \_\_\_\_\_  
 Name on Card: \_\_\_\_\_ (Print)  
 SIGNATURE: \_\_\_\_\_    Date: \_\_\_\_\_

MAIL Completed application and required documentation to:

**NORMI™**  
**CMI Accreditation Program**  
**22174 Prats Road**  
**Abita Springs, LA 70420**

*Monies will be refunded if the applicant is denied accreditation.*

**For Questions Regarding this Application**  
**call 1.877.251.2296 x 47 (Lance Eisen, COO)**