



TEXAS DEPARTMENT OF LICENSING & REGULATION

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

www.tdlr.texas.gov

CODE ENFORCEMENT OFFICER IN TRAINING VERIFICATION OF SUPERVISION FORM INSTRUCTIONS

To be considered for registration as a Code Enforcement Officer in Training ("CIT"), an individual ("applicant") must be engaged in code enforcement at the time of submitting the Code Enforcement Officer in Training Application ("application") and working under the supervision of a registered Code Enforcement Officer ("CEO").

This form must be completed by the registered CEO responsible for supervising the applicant's work and submitted with the application.

An applicant whose employer **does not** employ a CEO who may supervise the applicant while engaging in code enforcement **must submit, in addition to this form, a Certification Letter from the employer.** The Certification Letter must: (1) certify the employer does not employ a CEO who may supervise the applicant when engaged in code enforcement; (2) be written on the employer's letterhead; (3) be submitted with the CIT application and with this form; and (4) be signed by the applicant's direct supervisor.

1. **APPLICANT NAME** – Provide applicant's legal name in the spaces provided. (Last Name, First Name, Middle Name, Suffix) Examples of a suffix include Jr., Sr., and II. (Mr. is not a suffix.)
2. **APPLICANT 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](#).
3. **SUPERVISING CODE ENFORCEMENT OFFICER'S NAME OR DIRECT SUPERVISOR'S NAME** – Provide the registered code enforcement officer supervising the applicant's legal name or the legal name of the applicant's direct supervisor, **if applicable** in the spaces provided. (Last Name, First Name, Middle Name, Suffix) Examples of a suffix include Jr., Sr., and II. (Mr. is not a suffix.)
4. **REGISTRATION NUMBER** – Provide the supervising code enforcement officer's registration number, **if applicable**.
5. **APPLICANT JOB TITLE** – Provide job title for the code enforcement officer in training.
6. **DATE SUPERVISION BEGAN** – Provide the official date when the applicant's experience began.
7. **TOTAL NUMBER OF HOURS WORKED PER WEEK** – Provide the total number of hours the applicant works per week.
8. **JOB DUTIES** – Check all boxes that apply to the job duties that you have performed.
9. **SUPERVISOR STATEMENT** – This section must be signed by the supervising code enforcement officer or the applicant's direct supervisor, **if applicable**. Carefully read the statement before signing and dating.

SEND YOUR COMPLETED APPLICATION AND REQUIRED DOCUMENTS TO:

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

Documents submitted with the 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 public disclosure under the Texas Public Information Act. With the 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 VERIFICATION OF SUPERVISION FORM

This form must be completed by the registered Code Enforcement Officer who supervises the applicant for a Code Enforcement Officer in Training registration while engaged in code enforcement, or by the applicant's direct supervisor when authorized by TDLR.

1. Applicant Name:

Last

First

Middle

2. Applicant Social Security Number:

See instruction sheet for disclosure information

SUPERVISING CODE ENFORCEMENT OFFICER INFORMATION OR DIRECT SUPERVISOR INFORMATION

3. Supervising CEO or Direct Supervisor's Name:

Last, First, Middle Name, Suffix (Jr., Sr., III)

4. TDLR Registration Number (if applicable):

CODE ENFORCEMENT OFFICER IN TRAINING JOB DUTIES

5. Applicant Job Title:

6. Employment Start Date:

MM/DD/YYYY

7. Total Number of Hours Worked Per Week:

8. Experience: (Check all that apply)

Abandoned vehicles

Basic processes of law

Building abatement

Fire or health hazards

Health ordinances

Home occupations

Housing codes and ordinances

Junk vehicles

Nuisance violations

Sign regulations

Unsafe building conditions

Zoning ordinances

Violations of any fire, health, or building regulation, statute, or ordinance

Other (describe in full detail):

9. SUPERVISOR'S STATEMENT

I certify that I have read the information provided above and will supervise the applicant, as required by the Code Enforcement Officers Act, Texas Occupations Code, Chapter 1952; Texas Occupations Code, Chapter 51; and 16 Texas Administration Code, Chapter 62. I understand that providing false information to the Texas Department of Licensing and Regulation may result in a suspension or revocation of my Code Enforcement Officer registration and/or the imposition of administrative penalties (if applicable).

Supervisor's Signature

Date