



Manufactured Home Installer Continuing Education Registration Form

Factory Assembled Structures
PO Box 44420
Olympia WA 98504-4420
1-800-705-1411 (Option 3)
www.Lni.wa.gov

Make check or money order payable to: **Department of Labor & Industries** and mail to the address listed on this form.

Type or print clearly.

Applicant Information

Mr. Mrs. Ms.

Applicant Name (First, Middle Initial, Last)	Phone Number
Mailing Address	Email Address
City	State Zip Code

I am the owner OR an employee of the following business:

Business Name	Email Address
Certification Number (Your installer certification must be current in order to take this training)	

- Continuing Education Fee (GL Code 811) Fee: **\$68.20**
- MH Installer Manual on flash drive (GL Code 812) Fee: **\$16.90**

Class Preference

Indicate which option you would like:

Virtual Training Date: _____

Home Test Email Address (required): _____

Note: Home Tests will be emailed to the address listed. For this to count towards CE credit, a score of 70% or above is needed.

Attend a Contractor Training Day Event.
Date Attended _____ Location _____

For L&I Use Only	
Location/Date/Session	
Payment Received?	<input type="checkbox"/> Show <input type="checkbox"/> No Show
Confirmation Mailed	Certificate Mailed