



## Mississippi Home Inspection Division

LeFleur's Bluff Tower, Suite 300  
4780 I-55 North, Jackson, MS 39211

OR

Post Office Box 12685

Jackson, MS 39236-2685

(601) 321-6970 – Telephone \* (601) 321-6955 – Fax

[www.mrec.ms.gov](http://www.mrec.ms.gov)

### CHANGE OF ADDRESS FORM

*(Application will NOT be accepted unless typed or printed CLEARLY.)*

THE HOME INSPECTOR IS TO COMPLETE THE FOLLOWING FORM AND RETURN IT TO THE MHID WITHIN **TEN (10) DAYS** OF CHANGING THE ADDRESS ON THEIR LICENSE.

The **ORIGINAL** wall license **MUST** be returned to the MHID along with this form.

HOME INSPECTOR: \_\_\_\_\_  
(PRINT) (Name) (License #)

NEW ADDRESS: \_\_\_\_\_  
(PRINT) (Street Address)  
\_\_\_\_\_  
(P. O. Box)  
\_\_\_\_\_  
(City) (State) (Zip Code)  
\_\_\_\_\_  
(County)

OFFICE PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_  
(PRINT)

HOME INSPECTOR SIGNATURE: \_\_\_\_\_  
(Signature) (Date)