

**WAIVER AND RELEASE**

**Out of State Examinations For Real Estate Home Inspector**

**PLEASE READ CAREFULLY**

- 1) I wish to take the State of Washington, Department of Licensing, Home Inspector Examination (Examination) in the State of \_\_\_\_\_.
- 2) I have requested special permission from Washington State Department of Licensing (Department) to take this Examination outside of the State of Washington.
- 3) I understand that by taking this Examination outside of the State of Washington, the Department has no authority or control over the examination process including the testing conditions, procedures or evaluation.
- 4) To the fullest extent allowed by law, I agree to release and hold harmless the Department from any and all claims arising out of or related to this Examination.
- 5) I also understand and agree that any claim against the State of Washington must be filed in Thurston County Superior Court in Washington State.
- 6) The provisions of this Release shall not affect my right(s) which I may otherwise be entitled, under State or Federal law.

I have carefully read this Waiver and Release and I fully understand and agree to its contents. I certify that I am at least 18 years of age.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

**Please Return to: PSI Candidate Services**

Address: 18000 W. 105<sup>th</sup> St. Olathe, KS 66061

Fax number: 913-895-4650

E-mail: Info@goAMP.com