



15409 US Highway 19, Hudson FL 34667 * Tax ID: 65-01026
Email registrations to: support@contractorsinstitute.com

BCAI/ICC EXAM PREP REGISTRATION FORM

- Standard Building Insp/PX ___ New \$550 (90 days) ___ RETAKE \$225 (45 days)
Standard Mech Insp/PX ___ New \$550 (90 days) ___ RETAKE \$225 (45 days)
Standard Plumb Insp/PX ___ New \$550 (90 days) ___ RETAKE \$225 (45 days)
Standard Elec Insp/PX ___ New \$550 (90 days) ___ RETAKE \$225 (45 days)
Principles/Practices ___ New \$300 (90 days) ___ RETAKE \$150 (45 days)
Permit Technician ___ New \$300 (90 days) ___ RETAKE \$150 (45 days)
Coastal & Floodplain Inspector ___ New \$350 (90 days) ___ RETAKE \$150 (45 days)
Residential Plans Examiner ___ New \$350 (90 days) ___ RETAKE \$150 (45 days)
CBO ___ New \$1195 (24 mo) ___ RETAKE \$550 (12 months)
Residential Combination (all 4) ___ \$900 (6 mo all 4) or:
___ Bldg \$250 ___ Mech \$250 ___ Plumb \$250 ___ Elec \$250
___ RETAKE \$150 ea.

SUBTOTAL COURSE: _____

HOW ARE YOU TAKING THE COURSE:

- ___ Live CLASSROOM ___ Live WEBINAR Date: _____
___ Strictly ONLINE at own pace

ADD BOOK PACKAGE: Florida is testing on 2021 ICC Codes beg. March 1, 2025 (with 2020 NEC for elec)

- Residential Combo ___ \$420 (IRC with NEC, tabs) ___ \$225 (IRC only, tabs) + \$40 S/H
Residential Plans Examiner ___ \$225 (IRC, tabs) + \$40 S/H
Standard Building Insp/PX ___ \$325 SET + \$40 S/H
Standard Mech Insp/PX ___ \$300 SET + \$40 S/H
Standard Plumb Insp/PX ___ \$350 SET + \$40 S/H
Standard Elec Insp ___ \$195 (NEC, tabs) PX: ___ \$240 (NEC, Ugly's, tabs) + \$40 S/H
Principles & Practices ___ \$450 SET ___ \$275 statutes only book + \$40 S/H
Permit Technician ___ \$400 SET + \$40 S/H
Coastal Inspector ___ \$940 SET + \$50 S/H
CBO ___ \$1850 SET + \$80 S/H

SUBTOTAL BOOKS: _____

SHIPPING/HANDLING: _____

GRAND TOTAL TO BE PAID: _____

STUDENT INFORMATION:

- Student NAME: _____
Student Mailing Address: _____
SHIPPING Address (if different): _____
Daytime Phone: _____ EMAIL: _____
DOES THE STUDENT HAVE ANY DBPR LICENSES ALREADY? IF SO: _____

PAYMENT INFORMATION:

- ___ PERSONAL ___ MUNICIPALITY (TAX EXEMPT CERT #: _____)
___ INVOICE MUNICIPALITY AT ADDRESS BELOW
MAILING ADDRESS OF MUNICIPALITY: _____
EMAIL FOR INVOICING: _____

CREDIT CARD INFORMATION

- C/C NAME (if diff than student): _____
C/C ADDRESS: _____
Card No. _____ Exp Date: _____ CVV: _____