



American Association of Code Enforcement

Renewal for

Master Code Enforcement Professional

1. This application is for use **only** by individuals previously certified in the categories of Certified Code Enforcement Administrator (76), Residential Building Inspector (B1) and have successfully completed the following National Incident Management System (NIMS) courses:
 - ICS-100 Introduction to the Incident Command System (ICS)
 - ICS-200 ICS for Single Resource and Initial Action Incidents
 - ICS-300 Intermediate ICS for Expanding Incidents
 - ICS-400 Advanced ICS for Command and General Staff
 - IS-700 An Introduction to the National Incident Management System
 - IS-800 An Introduction to the National Response Framework
2. Applicants who hold the Disaster Response certification from ICC, in lieu of the NIMS courses, are eligible for MCEP renewal.
3. Applicants shall be an active member of AACE in good standing. An Associate Member is not eligible for the MCEP certification.
4. Applicants shall be currently employed in the field of code enforcement and have a minimum seven (7) years of active involvement in the field of code enforcement and/or regulation of health and safety. Years of service may include but not be limited to documentation from current and/or former employer(s), documentation from a public retirement system or similar verification.
5. To renew your certification as a Master Code Enforcement Professional, you must include a fee of \$10.00 along with this application. No further exams are necessary. This renewal is good for three years from the date of your initial certification and is due every three years henceforth.

Name: _____

Mailing Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Payment must accompany this application. Payment may be by check, credit card or money order made payable to AACE. A \$30.00 service fee will be charged on any returned check. All applications must be received via U.S. mail.

Payment/Charge Information:

(Please circle one) Check/ Money Order/ Visa/ Master Card/ AmEx/ Discover

Credit Card No: _____ Exp. Date: _____ CVV #: _____

Signature: _____

Print name as it appears on the card: _____

Total amount enclosed or to be charged to credit card: \$ _____

Return this completed application in its entirety along with the appropriate documentation and fees to:

**American Association of Code Enforcement
PO Box 740328
Arvada, CO 80006**