



**OKLAHOMA ABSTRACTORS BOARD**  
421 NW 13th Street, Suite 180 Oklahoma City, OK 73103  
Phone: (405) 522-5019 - Fax: (405) 522-5503

**Application for Appointment as Plant Inspector**

*All information submitted is a matter of public record.*

In order to be appointed to be an Inspector of an abstract plant built by a holder of a Permit to Develop an Abstract Plant, seeking the issuance of a Certificate of Authority, the applicant must have been a licensed Abstractor for eight (8) years. Neither the applicant, nor their employer, can have ANY ownership, title, interest, or any other personal or professional relationship with the holder of the permit for the abstract plant that the applicant is assigned to inspect, that could result in an appearance of impropriety.

If applicant leaves the employ of the below stated Certificate of Authority holder, or changes employment to another holder of a certificate of authority, he/she shall so inform the Oklahoma Abstractors Board immediately, so this application can be cancelled. Applicant, can reapply for an Appointment as Permit Inspector.

In compliance with the Oklahoma Abstractors Act, I hereby make application for appointment as a Permit Inspector and make the following statements under oath:

All questions must be answered completely.

1. Full Legal Name: \_\_\_\_\_  
(maiden name / other )

NOTE: If your legal name has changed since your last Abstractors License renewal, please provide copies of pertinent documents showing change.

2. Residence address \_\_\_\_\_

Mailing address, if different: \_\_\_\_\_

E-Mail address: \_\_\_\_\_

Phone Number (\_\_\_\_\_) \_\_\_\_\_ Cell Number (\_\_\_\_\_) \_\_\_\_\_

3. Employer (Certificate of Authority Holder)

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Address: \_\_\_\_\_

Business Telephone: (\_\_\_\_\_) \_\_\_\_\_ Hire Date: \_\_\_\_\_ Abstractor License No. \_\_\_\_\_

4. Must be 18 years of age or older. Date of Birth: \_\_\_\_\_

5. City/County in which you are an actual resident: \_\_\_\_\_

6. County(ies) in which you currently hold and Abstract License: \_\_\_\_\_

7. County(ies) in which your Employer holds a Certificate of Authority: \_\_\_\_\_

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8. List all City/County(ies) in which you have an association with any real estate related business: \_\_\_\_\_

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9. List all City/County(ies) in which your Employer has an association with any real estate related business: \_\_\_\_\_

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10. Have you been convicted of or pleaded guilty or nolo contendere to a felony or crime of moral turpitude in this state, another state, or a federal court, or are any charges pending? Yes \_\_\_  
No \_\_\_

If answer is Yes, give complete details: \_\_\_\_\_

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11. Has there been a change in your employment since your last Abstract License was renewed?  
Yes \_\_\_ No \_\_\_. If answer is yes, give complete details. \_\_\_\_\_

I have carefully read the Oklahoma Abstractors Act, as amended, governing said abstractors. I agree that I will conform to the law and regulations. I further give consent to the completion of a background check by an accredited company and the Oklahoma Tax Commission, as required by law. I certify that all answers given in this application are factual and true to the best of my knowledge and belief.

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

Applicant

I have carefully read the Oklahoma Abstractors Act, as amended, governing said abstractors. I agree that I will conform to the law and regulations. I further certify that all information contained in this Application for the Appointment as Permit Inspector, is factual and true to the best of my knowledge and belief, and I give my consent to the Oklahoma Abstractors Board to appoint said Applicant to inspect any holder of a Permit to Develop an Abstract Plant, for the possible issuance of a Certificate of Authority.

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

Employer of Applicant (Name and Title)

STATE OF OKLAHOMA )

) SS:

COUNTY OF \_\_\_\_\_)

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_