


BOARD FOR PROFESSIONAL ENGINEERS, LAND SURVEYORS, AND GEOLOGISTS

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REPLACEMENT LICENSE FORM FOR GEOLOGISTS AND GEOPHYSICISTS

SUBMIT WITH \$6 FEE *PER REQUEST*

REQUEST IS HEREBY MADE FOR:

- Replacement of Wall Certificate
- Replacement of GIT Certificate
- Replacement of Plastic Pocket ID Card

REASON FOR REQUEST:

- | | |
|--|---|
| <input type="checkbox"/> Lost | <input type="checkbox"/> Stolen |
| <input type="checkbox"/> Original not received | <input type="checkbox"/> Clerical Error* (Return original, no charge) |
| <input type="checkbox"/> Destroyed | <input type="checkbox"/> Name Change* (Return original) |

**Under these two circumstances, original certificates must be returned before replacements will be issued.*

Daytime Telephone Number: _____ E-mail Address: _____

NAME:	First	Middle	Last
ADDRESS:	Street	City	State Zip Code Country
DATE OF BIRTH	LAST 4 DIGITS OF SSN	LICENSE ISSUE DATE	
LICENSE CLASSIFICATION(S)		LICENSE/CERTIFICATE NUMBER(S)	

I hereby certify under penalty of perjury under the laws of the State of California that the statements and information set forth above are correct, that I will immediately return the license, certificate, or registration to the Board should said license, certificate, or registration be found, or report its whereabouts should that information become known.

SIGNATURE

DATE SIGNED