



## BOARD FOR PROFESSIONAL ENGINEERS, LAND SURVEYORS, AND GEOLOGISTS

2535 Capitol Oaks Drive, Suite 300, Sacramento, California, 95833-2944

Telephone: (916) 999-3600 – Toll Free: 1-866-780-5370

www.bpelsg.ca.gov



## REPLACEMENT LICENSE/CERTIFICATE FORM

### SUBMIT WITH \$10 FEE *PER REQUEST*

Mail this completed form, along with one check or money order (\$10 fee per request) payable to the Department of Consumer Affairs (DCA), to 2535 Capitol Oaks Drive, Suite 300, Sacramento, California, 95833-2944. The Board is unable to accept online payments for this request.

**REQUEST IS HEREBY MADE FOR:**

- Replacement of License Certificate
- Replacement of EIT/LSIT/GIT Certificate
- Replacement of Plastic Pocket ID Card

**REASON FOR REQUEST:**

Lost

Stolen

Original not received\*

*\*No charge if the license/certificate was issued within the past 90 days.*

Destroyed\* (Return original)

Clerical Error\* (Return original, no charge)

Name Change\* (Return original)

*\*Under these three circumstances, original license/certificate must be returned before a replacement will be issued.*

Daytime Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

NAME: \_\_\_\_\_

First

Middle

Last

ADDRESS: \_\_\_\_\_

Street

City

State

Zip Code

Country

DATE OF BIRTH \_\_\_\_\_ LAST 4 DIGITS OF SSN \_\_\_\_\_ LICENSE/CERTIFICATE ISSUANCE DATE \_\_\_\_\_

LICENSE/CERTIFICATE CLASSIFICATION(S) \_\_\_\_\_ LICENSE/CERTIFICATE NUMBER(S) \_\_\_\_\_

I hereby certify that the statements and information set forth above are correct.

SIGNATURE \_\_\_\_\_

DATE SIGNED \_\_\_\_\_