



State of Alaska
Department of Commerce, Community, and Economic Development
Division of Corporations, Business and Professional Licensing
Board of Registration for Architects, Engineers and Land Surveyors
State Office Building, 333 Willoughby Avenue, 9th Floor
P.O. Box 110806
Juneau, Alaska 99811-0806
Phone: (907) 465-2540 Fax: (907) 465-2974
E-mail: license@alaska.gov

FOR OFFICE USE ONLY

APPLICATION FOR OPENING A FILE FOR RETENTION OF LAND SURVEYOR WORK VERIFICATION FORMS (AS PROVIDED FOR IN 12 AAC 36.066)

APPLICANT
FILE NUMBER: _____

DIRECTIONS:

FEE: \$50

1. Read Statutes and Regulations.
2. Type the application. Handwritten applications will be returned.
3. Read items 1-8 at bottom; sign and date on the indicated lines.
4. Submit the application and fee (\$50) check or money order payable to the State of Alaska – to the Juneau office at the address above.

THIS IS NOT AN APPLICATION FOR EXAMINATION OR REGISTRATION.

Title (Optional): Mr. Ms. Mrs. Maiden Name (if applicable): _____

Name: _____
Last First Middle Name or Initial

Mailing Address: _____
Street or P.O. Box City State Zip Code

Physical Address: _____
Street City State Zip Code

Date of Birth: _____ Social Security Number (Optional): _____

Home Telephone Number: _____ Work Telephone Number: : _____

E-mail Address: _____ Fax Number (Optional): _____

By my signature below, I acknowledge and agree to the following:

1. I have read all applicable statutes and regulations, including 12 AAC 36.066 on the reverse side.
2. This is an application to open a file for retention of land surveyor work verification forms; it is NOT an application for examination or registration.
3. The Department will maintain this file for a period of five (5) years from the date the application and fees are received in the Juneau office.
4. Before the end of the five-year period, I may submit a new application and applicable fees and request the Department to maintain the file for an additional five years.
5. It is my responsibility to reapply before the end of the five-year term; the Department will NOT notify me in advance of the file termination date.
6. Work verification forms submitted for this file will not be reviewed by the staff or the board until I submit a complete application and all fees for land surveyor registration by comity or examination.
7. All work verification forms must be submitted directly to the Department by my employers or supervisors, and must be on a form prescribed by the board.
8. The \$50 fee is nonrefundable and may not be applied to any registration or examination fees.

Applicant's Signature _____

Date _____

**ALASKA BOARD OF REGISTRATION FOR ARCHITECTS,
ENGINEERS AND LAND SURVEYORS**

12 AAC 36.066. VERIFICATION OF LAND SURVEYOR WORK EXPERIENCE. (a) In support of an application for examination or registration as a land surveyor, an applicant shall arrange for verification of the work experience required in 12 AAC 36.064 and 12 AAC 36.065 to be submitted to the board. Verification of work experience must be on a form prescribed by the board and must be completed and submitted directly to the board by the employer who is verifying the applicant's experience.

(b) Department staff shall open a file for retention of completed work verification forms for an individual who has not yet submitted an application for examination or registration as a land surveyor if the individual

(1) submits a written request to open a work verification file; and

(2) attaches the file opening fee established in 12 AAC 02.110.

(c) Department staff shall maintain a work verification file for five years from the date that an individual completes the requirements of (b) of this section. Before end of that five years, an individual may request that the department maintain a work verification file for an additional five years by again completing the requirements of (b) of this section.

(d) A work verification form received for an individual will be reviewed by the board or the department only after that individual submits an application for registration as a land surveyor.

STATE OF ALASKA
DEPARTMENT OF COMMERCE, COMMUNITY, AND ECONOMIC DEVELOPMENT
DIVISION OF CORPORATIONS, BUSINESS AND PROFESSIONAL LICENSING
BOARD OF REGISTRATION FOR ARCHITECTS, ENGINEERS AND LAND SURVEYORS
P.O. BOX 110806
JUNEAU, ALASKA 99811-0806
(907) 465-2540
E-mail: license@alaska.gov

LAND SURVEYOR WORK VERIFICATION

SOCIAL SECURITY NO. (Optional): _____

NAME: _____ (Applicant) COMPANY: _____ (Employer)

(NOTE: Do you have a work verification file open with the board? YES NO
If you need information regarding opening a file, contact the division at the above address.)

SUPERVISOR: _____ DATES OF EXPERIENCE: _____
(Calendar Dates)

WORK EXPERIENCE (in Months)
(To be completed by applicant)

FIELD	Date(s) From/To	OFFICE	Date(s) From/To
Control or Geodetic Surveys		Boundary Computations	
Topographic Surveys		Field Note Reduction	
Staking Property Boundaries (Location & Monumentation)		Subdivision Design & Property Description Preparation	
Construction Layout (including Building Trades experience)		Survey Project Administration (as Project Manager)	
Professional Judgment Decisions Regarding Placement of Lines or Corners		Plat & Deed Research (Title Research)	
Other (Explain Below):		Other (Explain Below):	

EXPLANATION of "Other" Field or Office Experience (Use a separate page if necessary)

Supervision of Field Party: Yes No Supervision of Office Personnel: Yes No

Estimated Percentage of Time Supervising: Field Party: _____ Office: _____

APPLICANT

NOTE: No more than 12 months education or experience may be counted in any 12-month period. If you went to school full-time for a school year, you may count that time as a full year for education, but no summer experience may be counted toward "work experience."

It is recommended that surveying employees have this sheet completed approximately every year, thus limiting the research time required to verify experience. Employees may request that a copy of the completed form be placed in their employer's personnel file in case a backup copy is needed in the future. **Original work verifications should be submitted directly to the Alaska Board of Registration for Architects, Engineers and Land Surveyors (AELS) by the Supervisor or Professional Licensee certifying the work experience.**

DEFINITIONS

Please refer to the statutes and regulations referenced.

AS 08.48.341(10) "**practice of land surveying**" means the teaching of land surveying courses at an institution of higher learning, or any service or work the adequate performance of which involves the application of special knowledge of the principles of mathematics, the related physical and applied related sciences, and the relevant requirements of law for adequate evidence of the act of measuring and locating land, geodetic and cadastral surveys for the location and monumentation of property boundaries, for the platting and planning of land and subdivisions of land, including the topography, alignment and grades for streets, and for the preparation and perpetuation of maps, record plats, field note records and property descriptions that represent these surveys;

12 AAC 36.065(b) "**Responsible charge**" of professional land surveying (P.L.S.) means work as a supervisor under the responsible control of a land surveyor registered in the United States, and working in the "practice of land surveying" as described in AS 08.48.341(11). The remainder of the required work experience listed in (a) of this section must be derived from office or fieldwork involving the activities listed in AS 08.48.341(11). Partial completion of a curriculum leading to a degree in land surveying will be considered by the board in determining applicable work experience. The board will determine the amount of credit given for responsible charge experience gained under the responsible control of a professional in engineering based on applicability to professional land surveying.

SUPERVISOR

NOTE: Was applicant continuously employed during calendar dates listed on reverse? Yes No

If not, give number of months of actual employment on this report: _____

SUMMARY (in Months)
(To be completed by Supervisor or Professional Licensee)

	Months		Months
Field Work Eligible as "Responsible Charge"		Office Work Eligible as "Responsible Charge"	
Field Work Not Eligible as "Responsible Charge"		Office Work Not Eligible as "Responsible Charge"	

TOTAL **MONTHS** OF SURVEYING EXPERIENCE (On This Page): _____

TOTAL **MONTHS** RESPONSIBLE CHARGE (On This Page): _____

If responsible charge experience is credited to the applicant, give a brief description of a typical project for which applicant demonstrated professional judgment and responsible charge experience and the character of the duties required by the project:

Typical Project Description:

PROFESSIONAL REGISTRANT CERTIFICATION

Name: _____

Place Professional Seal
Here

Signature: _____

Address: _____

City, State, Zip: _____

Date: _____ Telephone No.: _____

Registration No.: _____ State: _____

Were you licensed at the time of supervision? Yes No

NOTE: This document must be submitted directly to the Division by the Supervisor.



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ProfessionalLicense.Alaska.Gov/BoardOfArchitectsEngineersAndLandSurveyors

Verification of Work Experience — Land Surveyor by Comity or Exam

→ **Applicant:** Complete Page 1 and Page 2 and then forward all four pages of this form to your employer or supervisor where you obtained your work experience. Make copies as needed.

Full Name:		Applying by:	<input type="checkbox"/> Comity <input type="checkbox"/> Exam
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Work experience forms and letters of reference must bear the signed and dated PLS stamp (seal) of the verifier.

The work experience forms and letters must be faxed or mailed directly from the signer to the Juneau office.

COMITY APPLICANTS ONLY: If you have at least five years of post-registration experience, in lieu of work experience verifications, you may provide two current letters of reference from registered land surveyors to verify that experience. The letters should address:

- your professional experience on projects;
- your ability and character;
- their professional association to you;
- how long they have been an associate of yours (minimum of 5 years);

WORK EXPERIENCE CALCULATION TABLE:

("End Date" cannot be projected beyond today's date.)

Start Date: _____ + End Date: _____ = Months: _____

Employment gaps of two or more months: _____ - "Months" = Total Months: _____

DEFINITIONS:

Sub-professional work means time spent working as rodman, chainman, recorder, draftsman, clerk of works, instrumentation, inspector, or similar work where personal responsibility and technical knowledge are slight.

Professional work means the time the applicant has been occupied in architecture, engineering, land surveying, or landscape architecture work of higher grade and responsibility than that of sub-professional work.

Responsible Charge may be gained either in the field or in the office. Responsible charge means:

- In the field, the applicant must have had the direction of work, the successful accomplishment of which rested upon the applicant, where the applicant had to decide questions of methods of execution and suitability of materials without relying upon advice or instructions from his/her superiors and where the applicant had to supply solutions to deficiencies in plans or had to correct errors in design without first referring them to higher authority for approval, except where the approval is a matter of form.
- In the office, the applicant must have had to undertake investigations or carry out assignments which demand resourcefulness and originality, or make plans, write specifications, and direct drafting and computations for the design of architectural, engineering, or land surveying work with only rough sketches, general information and field measurements for reference.

AS 08.48.341(13): "Practice of land surveying" means the teaching of land surveying courses at an institution of higher learning, or any service or work the adequate performance of which involves the application of special knowledge of the principles of mathematics, the related physical and applied sciences, and the relevant requirements of law for adequate evidence of the act of measuring and locating land, geodetic and cadastral surveys for the location and monumentation of property boundaries, for the platting and planning of land and subdivisions of land, including the topography, alignment, and grades for streets, and for the preparation and perpetuation of maps, record plats, field note records and property descriptions that represent these surveys;

No more than 12 months education or experience may be counted in any 12-month period. If you went to school full-time for a school year, you may count that time as a full year for education, but no summer experience may be counted toward "work experience" (12 AAC 36.064 (b) and 12 AAC 36.065(f)).

FIELD WORK EXPERIENCE:

- | | | |
|--|-------------|-----------|
| <input type="checkbox"/> Control or Geodetic Surveys | Start Date: | End Date: |
| | ----- | ----- |
| <input type="checkbox"/> Topographic Surveys | Start Date: | End Date: |
| | ----- | ----- |
| <input type="checkbox"/> Staking Property Boundaries
(location and monumentation) | Start Date: | End Date: |
| | ----- | ----- |
| <input type="checkbox"/> Construction Layout
(including building trades experience) | Start Date: | End Date: |
| | ----- | ----- |
| <input type="checkbox"/> Professional Judgement Decisions
(regarding placement of lines or corners) | Start Date: | End Date: |
| | ----- | ----- |
| <input type="checkbox"/> Other * | Start Date: | End Date: |
| | ----- | ----- |

* Explain: -----

OFFICE WORK EXPERIENCE:

- | | | |
|---|-------------|-----------|
| <input type="checkbox"/> Boundary Computations | Start Date: | End Date: |
| | ----- | ----- |
| <input type="checkbox"/> Field Note Reduction | Start Date: | End Date: |
| | ----- | ----- |
| <input type="checkbox"/> Subdivision Design
(and property description preparation) | Start Date: | End Date: |
| | ----- | ----- |
| <input type="checkbox"/> Survey Project Administration
(as project manager) | Start Date: | End Date: |
| | ----- | ----- |
| <input type="checkbox"/> Plat and Deed Research
(title research) | Start Date: | End Date: |
| | ----- | ----- |
| <input type="checkbox"/> Other * | Start Date: | End Date: |
| | ----- | ----- |

* Explain: -----

SUPERVISOR EXPERIENCE:

- | | |
|--|---|
| <input type="checkbox"/> Supervision of Field Party | Estimated percentage of time supervising: |
| | ----- |
| <input type="checkbox"/> Supervision of Office Personnel | Estimated percentage of time supervising: |
| | ----- |

→ **Verifiers of Work Experience:** Complete pages 3 and 4 of this form. Fax, mail, or email it directly to the Division. We require ALL four pages.

Any gaps of employment for any reason during the time frame above in excess of two continuous months must be subtracted from the "Months" above.

Information about the Applicant:

Name:	
Title:	
Duties:	

Describe the work the applicant performed, and his/her responsibilities:

What professional association did you have with the applicant?

Would you employ this applicant in a position of trust? **Yes** **No**

Do you recommend the applicant for professional registration? **Yes** **No**

Referring to the definitions provided on the previous page, in your opinion, has the applicant had *professional* experience on any projects? **Yes** **No**

Please name one:

1. Using the definitions and period of employment from Page 1, how many months were considered "sub-professional" work?

2. Using the definitions and period of employment from Page 1, how many months were considered "professional" work?

3. Using the definitions from Page 1, of the time considered "professional" work, how many months was the applicant in a position of "responsible charge"?

(Only PLSs may verify "responsible charge" experience)

The total months for sub-professional and professional experience should equal the total months during the period of employment stated on the previous page. Responsible charge experience is a subset of professional experience and should be less than or equal to the number of months entered for question number 2.

Are you a professional land surveyor? Yes No

Were you registered at the time you supervised the applicant? Yes No

Was the applicant continuously employed during the calendar months stated on the Work Experience Calculation Table on the first page? Yes No

WORK EXPERIENCE SUMMARY:

Total Field Work: _____ **Months**

Field work eligible as "responsible charge": _____ **Months**

Field work NOT eligible as "responsible charge": _____ **Months**

Total Office Work: _____ **Months**

Office work eligible as "responsible charge": _____ **Months**

Office work NOT eligible as "responsible charge": _____ **Months**

<div style="border: 1px dashed black; padding: 5px; min-height: 100px;">Professional Seal*</div>	Signed by: _____	Date: _____
	Printed Name: _____	Title: _____
	Phone: _____	Email: _____
	Registration #: _____	Registration State: _____

* If no stamp or seal is available, please state the reason why:

The verifier of work experience must submit ALL FOUR PAGES directly to the Division by mail, email, or fax.



THE STATE of ALASKA

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CREDIT CARD PAYMENT

For security purposes please do not email credit card information. Fax or mail this credit card payment form to the Division. Completion of this form is not proof of payment until the Division processes the information. If any information on this form is illegible, the form will be rejected.

Name of Applicant or Licensee: _____

Type of License: _____ License Number (if applicable): _____

I wish to make payment by credit card for the following (check all that apply):

- Application Fee: _____ Amount: _____
License or Renewal Fee: _____ Amount: _____
Other (name change, wall certificate, fine, duplicate license, exam, etc.):
1. _____ Amount: _____
2. _____ Amount: _____

Total: _____

Name (as shown on credit card): _____

Mailing Address: _____

Phone: _____ Email (optional): _____

Credit Card Type: [] VISA — or — [] Mastercard

Signature of Credit Card Holder: _____

.....

VISA or Mastercard Number: _____ Expiration Date: _____

This section below the dotted line will be destroyed upon processing of the payment.