

of

SKA 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 PO Box 110806, Juneau, AK 99811-0806 Phone: (907) 465-2550 • Fax: (907) 465-2974 Email: AELSboard@Alaska.Gov ProfessionalLicense.Alaska.Gov/BoardOfArchitectsEngineersAndLandSurveyors

Land Surveyor by Exam Registration Application Instructions

Applications are processed according to the date received. The Board meets four times a year, usually in February, May, August, and November. Board meeting dates are posted on the Board's website.

Applications and supporting documents, (work experience verifications, official transcripts and verification of examination) and nonrefundable application fees must be received in the Juneau office 30 days before a scheduled board meeting.

Applicants will be notified via email of action taken by the Board as soon as possible, but not more than three weeks after the board meeting. All documents received prior to receipt of application will be held up to one year and matched with an application upon receipt.

An applicant for registration as a land surveyor must pass a state examination covering laws, procedures, and practices concerning land surveying in Alaska. See 12 AAC 36.100.(d)(3).

Applications must be reviewed by the board for approval to sit for the Alaska Land Surveying Examination (AKLS) offered in April.

The board will grant up to two postponements to an applicant who is scheduled to take the AKLS if the applicant's request for postponement is filed with the board no later than 30 days immediately following the date of examination. An applicant who does not appear for an examination and does not qualify for a postponement is not eligible for a refund of the examination fee and shall meet the reexamination application requirements in 12 AAC 36.040 to be scheduled for a later examination. See 12 AAC 36.070.

| The applications are updated frequently. If you obtained this application other than directly from the Division or its official website the application may be outdated. <u>Please check the website for the latest version</u> . |
|--|
| A denial of an application for registration may be reported to any person, professional licensing board, federal, state, or local government agency, other entity making a relevant inquiry, or as may be required by law. |
| Applicants are required to have all examinations and required work experience verified by a third party using Alaska forms and mailed directly to the Alaska board office. |
| Applicants must meet the qualifications for licensure in accordance with AS 08.48.201. |
| It is your responsibility to be aware of licensing requirements and provide all necessary documentation. |
| The Board conducts a thorough evaluation of education, training, employment or work history, malpractice history, and any criminal or disciplinary history. We recommend you do not make commitments for loans, practice start dates, home purchases, etc., based on the expectation of licensure. The Board will not accelerate one application over others nor will it forego any elements of its screening process. |
| Retaking a failed exam: Candidates must submit a request to the division, in writing or by email, to retake a failed exam. The Division will then notify NCEES of exam eligibility. |
| Postponing an exam: NCEES does not allow candidates to postpone examinations. NCEES will permit a partial refund of canceled exams but only up to a deadline date established prior to each examination date. Please contact NCEES for more information. |
| SEALING - 12 AAC 36.185(d): "The registrant shall include the date each time the registrant signs and seals a document by inserting the date within the seal or in a close proximity to the seal." The Board has defined "close proximity" as within two inches of the seal. |
| Please submit the following documents concurrently: |
| Thease submit the following documents concurrently. |
| Original application form completely and accurately filled in, signed, and notarized. Missing information will cause delays in processing or a return of the application. |
| All applicable fees (application, AKLS EXAM, and registration) in check or money order payable to the State of Alaska, or use the attached credit card payment form. |
| Be sure to sign and date your application. |
| Land surveyors may also be required to have a state husiness license. Contact Rusiness |
| Land surveyors may also be required to have a state business license. Contact Business Licensing at (907) 465-2550, or email at: <i>BusinessLicense@Alaska.Gov</i> |
| |

REQUIREMENTS FOR APPLICATION: ALL parts of this application must be completed. The following documents must be on file before the Board will consider your application for a land surveyor registration by exam:

1. APPLICATION:

A completed, signed, and notarized application. The application may be submitted by mail or fax. Emailed applications will not be accepted. Typewritten applications are preferred. If any information on the form is illegible, the form will be rejected.

2. FEES:

Make check or money order payable to "State of Alaska", or use the attached credit card form:

| Total Due: | \$400.00 |
|--------------------------------|----------|
| AKLS Exam Fee: | \$100.00 |
| Registration Fee: | \$100.00 |
| Nonrefundable application fee: | \$200.00 |

3. TRANSCRIPTS, EXAM, AND REGISTRATION VERIFICATION:

- Verification of NCEES exams must be submitted directly from the state board(s) to our office; these can be accepted by email or through NCEES.org E3 system.
- Official transcripts must be submitted directly from the institution by email, mail, or through *NCEES.org* E3 system.

4. VERIFICATION OF WORK EXPERIENCE:

 Work Experience Verification (form #08-4714) with at least 36 months of responsible charge verified by a professional land surveyor. This document, once signed and sealed, can be accepted by email if sent directly from your verifiers to our office.

APPLICATION PROCESSING:

The average time to process a paper application varies by program, but can take several weeks from the date it is received in this office, complete with all correct forms, supporting documents and appropriate fees paid. If the application is incomplete, the applicant will be notified of the incomplete and/or incorrect documents and fees. When the application is complete and correct and all supporting documents have been received and all fees have been paid the license will be issued and sent to you with a cover letter about Alaska statutory requirements. If the application is not approved for licensure, a written explanation of the basis of that denial and information on how to appeal the decision will be provided. Start the process far enough in advance to allow for processing time. Applications are reviewed in order of receipt in our office, and walk-in customers should not expect immediate review.

LICENSE TERM:

There is no "inactive" status. If you choose not to renew your license, it will lapse. Licenses are issued for a two-year period and expire on December 31 of odd-numbered years, regardless of the date of issuance, except licenses issued within 90 days of the expiration date which are issued to the next biennial expiration date. One renewal notice will be mailed at least 30 days before license expiration to the last known address of record. If your program offers temporary licenses, they are issued for either 30 consecutive days or until the end of the calendar year, whichever period is shorter.

"YES" RESPONSES:

A "Yes" response in the application does not mean your application will be denied. If you have responded "Yes" to any professional fitness questions in the application, be sure to submit a signed and dated explanation, and both charging and closing court documentation.

DENIAL OF APPLICATION:

Please be aware that the denial of an application of licensure may be reported to any person, professional licensing board, federal, state, or local governmental agency, or other entity making a relevant inquiry or as may be required by law.

RANDOM AUDIT:

If your program requires continuing education, the Division will audit a percentage of the license renewals. If your license is randomly selected for audit, you will be sent a letter and required to submit copies of documentation and proof that you satisfied the continuing competency requirements as you stated on this renewal form. Please note that licensees are randomly selected by computer and may be randomly selected as often as the computer program chooses. You must save your documents for at least four years so you can respond to audits.

ADDRESS OR NAME CHANGE:

In accordance with 12 AAC 02.900, it is the applicant's/licensee's responsibility to notify the Division, in writing, of changes of address or name. Name and address change notification forms are available on the Division's website. The address of record with the Division will be used to send renewals and all other official notifications and correspondence. The name appearing on the license must be your current legal name.

CERTIFIED TRUE COPIES:

If any of the required documents will be issued under a former name, indicate on the application and submit marriage license and/or court documents that are notarized as a "certified true copy of the original document". To obtain a certified true copy, you must present the notary with the original document along with the photocopy. You must write, "I certify this is a true copy of the original document" and sign your name. The notary will compare the original document with the copy and then notarize your signature.

SOCIAL SECURITY NUMBERS:

AS 08.01.060 and 08.01.100 require that a U.S. Social Security Number be on file with the Division before a professional license is issued or renewed for an individual. If you do not have a U.S. Social Security Number, please complete the Request for Exception from Social Security Number Requirement form located at *ProfessionalLicense.Alaska.gov* or contact the Division for a copy of the form.

PUBLIC INFORMATION:

Please be aware that all information on the application form will be available to the public, unless required to be kept confidential by state or federal law. Information about current licensees, including mailing addresses, is available on the Division's website at *ProfessionalLicense.Alaska.gov* under License Search.

ABANDONED APPLICATIONS:

Under 12 AAC 02.910, an application is considered abandoned when 12 months have elapsed since correspondence was last received from or on behalf of the applicant. An abandoned application is denied without prejudice. At the time of abandonment, the Division will send notification to the last known address of the applicant, who has 30 days to submit a written request for a refund of biennial license and other fees paid. The application fee will not be refunded. If no request for refund is received within that timeframe, no refund will be issued and all fees will be forfeited.

PAYMENT OF CHILD SUPPORT AND STUDENT LOANS:

If the Alaska Child Support Enforcement Division has determined that you are in arrears on child support, or if the Alaska Commission on Postsecondary Education has determined you are in loan default, you may be issued a nonrenewable temporary license valid for 150 days. Contact Child Support Services at (907) 269-6900, or the Postsecondary Education office at (907) 465-2962 or (800) 441-2962 to resolve payment issues.

BUSINESS LICENSES:

The status of a professional license will directly impact the status of an associated business license. Renewal applications for business licenses are mailed separately. For more information about business licenses, call (907) 465-2550 or online at: *BusinessLicense.Alaska.gov*

STATUTES AND REGULATIONS:

The complete set of statutes and regulations for this program are available by written request or online at the Division's website: *ProfessionalLicense.Alaska.Gov*

If you would like to receive notice of all proposed regulation changes for your program, please send a request in writing with your name, preferred contact method (mail or email), and the program you want to be updated on to:

REGULATIONS SPECIALIST Email: RegulationsAndPublicComment@Alaska.Gov Department of Commerce, Community, and Economic Development Division of Corporations, Business and Professional Licensing P.O. Box 110806 Juneau, Alaska 99811-0806

Rev. 10/24/17

General Information





FOR DIVISION USE ONLY

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 PO Box 110806, Juneau, AK 99811-0806 Phone: (907) 465-2550 • Fax: (907) 465-2974 Email: *AELSboard@Alaska.Gov ProfessionalLicense.Alaska.Gov/BoardOfArchitectsEngineersAndLandSurveyors*

Land Surveyor by Exam Registration Application

| PARTI | Fees and Applicant Information | | | | |
|---|---|--------|----------------------------------|--|--|
| Required Fees | Non-Refundable Application Fee Registration Fee AKLS Exam Fee | | \$200.00 \$100.00 \$100.00 | | |
| Optional Fee: | Wall Certificate | | \$20.00 | | |
| Full Legal Name |): | | | | |
| Provide all other names used (maiden, nicknames, aliases). Attach documentation of all legal name changes. Not Applicable Other Names Used: | | | | | |
| Name you want | on your registration: | | | | |
| Birthdate: | | Title: | □ Mr. □ Ms. | | |
| Mailing Addres | s: | | | | |
| Contact Phone: | | | | | |

 EMAIL AGREEMENT: By choosing to receive correspondence on any matter affecting your license or other business with the Alaska Division of Corporations, Business and Professional Licensing by email, you agree to notify the Division in writing when your email address changes. You understand that failure to check your email address or to keep it in good standing may result in an inability to receive crucial information, potentially resulting in the inability to obtain or retain licensure.

 Email Address:

 Send my Correspondence by Email
 Send my Correspondence by US Mail
 Social Security Number. It is considered confidential information

and will not be publicly disclosed; it may be used to verify inter-state licensure.

08-4717

PART II Business Information

| Business Name: | | | | | |
|--------------------|---|---|---|--|--|
| Business Address: | | | | | |
| | | | | | |
| Current Job Title: | | | | | |
| Work Phone: | (|) | _ | | |

PART III Technical Education

Official transcripts are required and must be sent directly to the Board office from the university, unless verified through NCEES Council Records.

| 1. Institution Name: | State: | |
|----------------------|------------------|--|
| Degree Awarded: | Graduation Date: | |
| | _ | |
| 2. Institution Name: | State: | |
| | | |

PART IV Professional Fitness

The following questions must be answered. "Yes" answers may not automatically result in license denial. If you answer "Yes" to any of the questions, please explain dates and circumstances on a separate piece of paper, signed and dated, and send any supporting documents that are applicable (court records, judgments, charging documents, etc.).

WHEN IN DOUBT, DISCLOSE AND EXPLAIN

□ Yes

Π No

□ Yes □ No

1. Have you been convicted of a crime or are you currently charged with committing a crime? For purposes of this question, "crime" includes a misdemeanor, felony, or a military offense, including but not limited to, a conviction involving driving under the influence (DUI) or driving while intoxicated (DWI), driving without a license, reckless driving, or driving with a suspended or revoked license. "Convicted" includes having been found guilty by verdict of a judge or jury, having entered a plea of guilty, nolo contendere or no contest, or having been given probation, a suspended imposition of sentence, or a fine.

| 2. | Have you been found guilty of misconduct, dishonesty, fraud, incompetence, and/or gross negligence in the practice of architecture, engineering, land surveying, landscape architecture or had a professional license denied, revoked, suspended, or otherwise restricted, conditioned, or limited or have you surrendered a professional license, been fined, placed on probation, reprimanded, disciplined, or entered into a settlement with a licensing authority in connection with a professional license you have held in any jurisdiction including Alaska and that of any |
|----|--|
| | military authorities or is any such action pending? |

Rev. 10/24/17

PART V Statement of Professional Experience

| | List your professional experience in reverse chronological order (most recent experience first). Part V must be completed in full, even if you are submitting an NCEES Council Record. Read the definitions below for "responsible charge", "professional", and "sub-professional". Make copies to add additional work experience as necessary. | | | | | |
|----|--|-------------|------------------------|----------------------|-----------------|--|
| 1. | Job Title: | | | | | |
| | Start Date (mm/yyyy): | | | End Date (mm/yyyy |): | |
| | Name of Employer: | | | | | |
| | Address of Employer: | | | | | |
| | Contact Person: | | | | | |
| | Describe the profession | al experier | | | | |
| | Professional: | + | Sub-Professional: | = | Total Months: | |
| | How many of the | mo | nths of professional e | experience are respo | onsible charge? | |

Definition of Responsible Charge

12 AC 36.990(19)(20)

(1) Responsible charge of work in the field

means the direction of work, the successful accomplishment of which rested upon the applicant, where the applicant has to decide questions of methods of execution and suitability of materials without relying upon advice or instructions from his superiors and where the applicant has to supply solutions to deficiencies in plans or has to correct errors in designs without first referring them to higher authority for approval, except where the approval is a matter of form.

(2) Responsible charge

as it pertains to "work in the office" means undertaking investigations or carrying out assignments which demand resourcefulness and originally, or making plans, writing specifications, and directing drafting and computations for the sign of architectural, engineering, or land surveying work with only rough sketches, general information, and field measurements for reference.

Responsible charge experience is counted within the total experience time accumulated.

"**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 engineering or land surveying work of higher grade and responsibility than that of sub-professional work.

PART V Statement of Professional Experience

| | List your professional experience in date order. This Part must be completed in full, even if you are submitting an NCEES Council Record. Make copies as necessary. | | | |
|----|---|---|--|--|
| 2. | Job Title: | | | |
| | Start Date (mm/yyyy): | End Date (mm/yyyy): | | |
| | Name of Employer: | | | |
| | Address of Employer: | | | |
| | Contact Person: | | | |
| | Describe the profession | Il experience: | | |
| | | | | |
| | Professional: | + Sub-Professional: = Total Months: | | |
| | How many of the | months of professional experience are responsible charge? | | |

| 3. Job Title: | | |
|-------------------------|--------------------------------|------------------------------|
| Start Date (mm/yyyy): | End | Date (mm/yyyy): |
| Name of Employer: | | |
| Address of Employer: | | |
| Contact Person: | | |
| Describe the profession | nal experience: | |
| | | |
| Professional: | + Sub-Professional: | Total Months: |
| How many of the | months of professional experie | ence are responsible charge? |

PART VII Personal and Professional Reference List AS 08.48.201(a)(3) List five references. At least three of the references must be professional land surveyors. Do not send reference letters unless requested by the Board. Do not send reference is a professional land surveyor. Registration Number: State: Name: Address: Phone: Phone:

| This reference is a professional land surveyor. | | Registration Number: | State: |
|---|--|----------------------|--------|
| Name: | | | |
| Address: | | | |
| Phone: | | | |

| This reference is a professional land surveyor. | | Registration Number: | State: |
|---|--|----------------------|--------|
| Name: | | | |
| Address: | | | |
| Phone: | | | |

| This reference is a professional land surveyor. | | Registration Number: | State: |
|---|--|----------------------|--------|
| Name: | | | |
| Address: | | | |
| Phone: | | | |

| This reference is a professional land surveyor. | | Registration Number: | State: |
|---|--|----------------------|--------|
| Name: | | | |
| Address: | | | |
| Phone: | | | |

PART VIII Examinations

An applicant for registration as a land surveyor must pass a state examination covering laws, procedures, and practices concerning land surveying in Alaska. See 12 AAC 36.100.(d)(3).

Applications must be reviewed by the board for approval to sit for the Alaska Land Surveying Examination (AKLS) offered in April.

| | State | Year | NC | EES |
|-----------|-------|------|-------|------|
| Surveyors | FS: | | □ Yes | 🗆 No |

PART IX Notarized Signature

The Board of Registration for Architects, Engineers and Land Surveyors may deny, suspend, or revoke the registration of a person who has obtained or attempted to obtain a registration to practice engineering or land surveying by fraud or deceit. The person may also be subject to criminal charge for perjury.

| Notary Stamp | Applicant's Signature: | Printed Name: | |
|--------------|-----------------------------------|--|--|
| | Notary Public for State of: | Subscribed and Sworn to Before me on this Day: | |
| | Notary's Signature: | My Commission Expires: | |

Before you mail this application, have you...

- ✓ completed all questions in the form?
- ✓ attached your check or money order for fees payable to the State of Alaska, or completed the attached credit card payment form?
- ✓ signed and dated the application form?
- ✓ attached explanations and supporting documents for any "Yes" responses?



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 PO Box 110806, Juneau, AK 99811-0806 Phone: (907) 465-2550 • Fax: (907) 465-2974 Email: *license@alaska.gov*

ProfessionalLicense.Alaska.Gov/BoardOfArchitectsEngineersAndLandSurveyors

Verification of Work Experience — Land Surveyor by Comity or Exam

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

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 | mor | nths: | - | "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:

| Control or Geodetic Surveys | Start Date: | End Date: | |
|---|-------------|---------------|--|
| Topographic Surveys | Start Date: | End Date: | |
| Staking Property Boundaries (location and monumentation) | Start Date: | End Date: | |
| Construction Layout (including building trades experience) | Start Date: | End Date: | |
| Professional Judgement Decisions (regarding placement of lines or corners) | Start Date: | End Date: | |
| Other * | Start Date: | End Date: | |
| * Explain: | | | |

OFFICE WORK EXPERIENCE:

| | Boundary Computations | Start Date: | End Date: | |
|-----|---|-------------|--------------------------------|--|
| | Field Note Reduction | Start Date: | End Date: | |
| | Subdivision Design (and property description preparation) | Start Date: | End Date: | |
| | Survey Project Administration (as project manager) | Start Date: | End Date: | |
| | Plat and Deed Research (title research) | Start Date: | End Date: | |
| | Other * | Start Date: | End Date: | |
| | * Explain: | | | |
| SUF | PERVISOR EXPERIENCE: | | | |
| | Supervision of Field Party | Estimated p | ercentage of time supervising: | |
| | Supervision of Office Personnel | Estimated p | ercentage of time supervising: | |

| | 08-4716 | Rev. 10/24/17 | Work Experience Verification Page 2 of 4 |
|--|---------|---------------|--|
|--|---------|---------------|--|

-> 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:

| | ame: | | | |
|-----------|------------------|--|-------|------|
| Tit | tle: | | | |
| Dı | uties: | | | |
| De | escribe the wo | rk the applicant performed, and his/her responsibilities: | | |
| W | hat professior | al association did you have with the applicant? | | |
| Would yo | ou employ this a | applicant in a position of trust? | Yes 🗌 | No 🗌 |
| Do you re | ecommend the | applicant for professional registration? | Yes 🗌 | No 🗌 |
| applicant | had profession | ions provided on the previous page, in your opinion, has the nal experience on any projects? | Yes 🗌 | No 🗌 |
| Ple | ease name one | : | | |
| | | nitions and period of employment from Page 1, hths were considered "sub-professional" work? | | |
| | | nitions and period of employment from Page 1, hths were considered "professional" work? | | |
| 3. | "professional" | nitions from Page 1, of the time considered work, how many months was the applicant in esponsible charge"? | | |
| | a position of "r | | | |

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 |

| Professional Seal* | | |
|--------------------|-----------------|---------------------|
| | Signed by: | Date: |
| | | |
| | Printed Name: | Title: |
| | | |
| | Phone: | Email: |
| | | |
| <u>ا</u> | 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 ASKA

FOR DIVISION USE ONLY

Department of Commerce, Community, and Economic Development Division of Corporations, Business and Professional Licensing

State of Alaska Department of Commerce, Community, and Economic Development Division of Corporations, Business and Professional Licensing PO Box 110806, Juneau, AK 99811 Phone: (907) 465-2550

Credit Card Payment Form

All major credit cards are accepted. For security purposes, do not email credit card information. Include this credit card payment form with your application.

| Name of Applicar | nt or Licensee: | | |
|-------------------|---------------------------|---|--------|
| Program Type: | | License Number <i>(if applicable)</i> : | |
| I wish to make pa | ayment by credit card fo | r the following <i>(check all that apply)</i> : | AMOUNT |
| Application | ו Fee: | | |
| License or | Renewal Fee: | | |
| Other (nar | ne change, wall certifica | ate, fine, duplicate license, exam, etc.): | |
| 1 | | | |
| 2 | | | |
| | | TOTAL: | |
| Name (as shown | on credit card): | | |
| Mailing Address: | | | |
| Phone Number: | | Email <i>(optional)</i> : | |
| Signature of Cre | edit Card Holder: | | |
| 08-4438 | Rev 12/26/18 | Credit Card Payment Form (all major cards accepted) | |

CREDIT CARD INFO: Your payment cannot be processed unless all fields are completed! 1. Account Number: All four fields **MUST** be completed! Expiration Date: 2. This section will be Billing ZIP Code: 3. destroyed after the payment is processed. 4. Security Code: