

2011 Ohio Dual P.E., P.S. License Renewal Application

REMINDER! For faster license renewal, renew online: www.peps.ohio.gov. Choose **Annual Renewal**.

DO NOT SUBMIT this application if continuing professional development requirements are not complete in accordance with section 4733.151 of the Ohio R.C. You can complete and save this form on your computer before mailing with fee.

NAME AND ADDRESS REQUIRED

NAME
[]
ADDRESS
[]
ADDRESS
[]
CITY STATE ZIP CODE
[] [] []

DUAL NUMBER REQUIRED

Your **DUAL** number is your 5-digit P.E. number

DUAL- []

\$60.00 DUE NOW

Amount due includes 50% late penalty.

Make check or money order payable in U.S. funds to **Treasurer, State of Ohio**. Cash not accepted. For credit card payment, renew online.

NAME CHANGE AND/OR CHANGE OF ADDRESS ONLY

NAME CHANGE **REQUIRES LEGAL DOCUMENTATION**
ADDRESS
[]
ADDRESS
[]
ADDRESS
[]
CITY STATE ZIP CODE
[] [] []
OHIO COUNTY **REQUIRED IF OHIO ADDRESS**
[]

I do not plan to renew at this time.

IMPORTANT — DO NOT USE FOR REINSTATEMENT!
This application **CANNOT** be used for reinstatement of a professional license. It is to be used for 2011 P.E., P.S. renewal only. Email the Board, at pes.board@pes.ohio.gov, for reinstatement instructions.

DO NOT SUBMIT copies of continuing professional development information with this application.

YES NO I certify that I have completed the 15-hour continuing professional development requirement in accordance with Section 4733.151 of the Ohio Revised Code.

If you answered **NO** to this question, **DO NOT** submit this renewal application.

FOR MORE INFORMATION REGARDING THE CPD REQUIREMENT, CPD AUDIT, AND A DOWNLOADABLE ACTIVITY LOG, VISIT OUR WEBSITE AT **WWW.PEPS.OHIO.GOV**.

YES NO Since your last renewal have you been convicted of or pleaded guilty to any felony or crime involving moral turpitude or had your registration revoked, voluntarily surrendered or suspended by another jurisdiction? If **YES**, please give date, type of conviction, court of conviction, case number, and explanation.

ATTACH SEPARATE SHEET IF NEEDED

[]

I CERTIFY that this is a properly completed and accurate license renewal application which I am submitting to the state of Ohio's State Board of Registration for Professional Engineers and Surveyors. I have not omitted any requested information. I understand that my renewal is contingent upon satisfactory completion of all requirements. I further understand that any person who knowingly makes false statements on the renewal application is guilty of falsification under section 4733.20 of the Ohio Revised Code, and subject to penalties under law.

Applicant Signature

Date Signed

**2011 OHIO DUAL LICENSE RENEWAL
ENGINEERS AND SURVEYORS BOARD
50 W BROAD ST STE 1820
COLUMBUS OH 43215-5905**

Make check or money order payable in U.S. funds to **Treasurer, State of Ohio**. Cash not accepted. For credit card payment, renew online. Send completed, signed and dated application to the Board address at left.