

If the requested information below is incomplete and/or fee(s) mailed separately, your renewal WILL BE RETURNED.



Louisiana Professional Engineering and Land Surveying Board
 9643 Brookline Avenue, Suite 121
 Baton Rouge, LA 70809
 Tax ID 72-6001723
 Phone: (225) 925-6291
www.lapels.com

Office use only: Check # _____
 Amount: \$ _____

Professional Engineering Firms and Professional Land Surveying Firms

Part II - License & Contact Information:

Invoice Date: February 1, 2019
 Renewal Deadline: **March 31, 2019**
 Biennial Period: **04/01/2019 - 03/31/2021**
 License Type: _____ License #: _____
 Taxpayer ID #: _____
 Phone: _____ Ext. _____

Part I – Organization Name and Mailing Address:

Website Address:

Email Address:

Renewal invoice and payment **MUST** be postmarked by **March 31, 2019** to avoid a late fee

Part III – Status Indicator:

1. The firm wishes to renew its license status as:
2. Is the firm in "Good Standing" with the Louisiana Secretary of State?

Part IV – Violations:

1. _____ been **(a)** subject to disciplinary action by the licensing authority in another jurisdiction, or **(b)** convicted, or entered a plea of guilty or nolo contendere of any crime since the firm's last renewal.
2. If yes, list the jurisdiction(s) in which the firm was disciplined, or convicted or entered a plea of guilty or nolo contendere, and provide details. Include additional pages if necessary.

Part V – Supervising Professional(s):

Please identify all supervising professional(s) below. The following individuals are designated as supervising professionals and each hereby certifies that they have read and understand the Rules of the Board (LAC 46:LXI). Furthermore, they acknowledge their responsibility to inform the Board in writing within 30 days of a change of employment. (See reverse side of this invoice for an extract of the Board's rule on supervising professionals)

Print the Name(s) of the Supervising Professional(s)	PE/PLS License Number

Part VI – Email/Phone Privacy Option:

Do you want your email address(es) and telephone number(s) which you have provided to us to be kept private and not made available to vendors requesting rosters for distribution of engineering/ land surveying CPD information or to other third parties?
Yes, keep private No, share when requested

Print a copy of this attestation form – FOR EVERY SUPERVISING PROFESSIONAL LISTED IN PART V. Every supervising professional listed must certify that they have read and understand Chapter 2305 of the Board Rules.

	Initial	Date
I, _____, have read chapter 2305 of the LAPELS rules and I am a licensed professional:		
<ul style="list-style-type: none"> a. Whose primary employment is with the firm on a full-time basis; or b. Whose secondary employment is with the firm, provided the supervising professional is an owner of the firm 		
As the supervising professional I understand my responsibilities include:		
a. Renewal of the firm’s license and notification to the board of any change in the firm’s supervising professionals;		
b. Institution and adherence of policies of the firm that are in accordance with the licensure law and the rules of the board; and		
c. Ensuring that all professional services provided by the firm are performed by or under the responsible charge of a licensed professional.		

Furthermore, I understand		
a. Nothing herein shall prohibit a supervising professional from also being in responsible charge of professional services provided by the firm.		
b. A failure to comply with any of the provisions of this Chapter may subject both the licensed firm and the supervising professional in disciplinary action by the board.		
c. Compliance with this section will not be met by a contractual relationship between the firm and a licensed professional or a firm of licensed professionals in which such licensed professional or firm of licensed professionals is available on a consultative basis. Nor will it be considered compliance if a licensed professional is related to the firm solely in a nominal or inactive capacity.		

Print Name of Supervising Professional	License Number	Supervising Professional Signature	Date

Complete the enclosed credit card authorization form; or make check or money order payable to LAPELS (*US funds only*).
The invoice and payment can be mailed to LAPELS or emailed to LaTasha Andrews at latasha@lapels.com.

*Status (<i>Every</i> status requires a completed renewal invoice)	License Type	Renewal Fee (<i>per license</i>) (if received <u>on or before</u> deadline)	Renewal Fee (<i>per license</i>) (if received <u>after</u> deadline)
Active	EF Engineering Firm	\$120	\$180
Active	VF Land Surveying Firm	\$120	\$180
*Expired	EF Engineering Firm	*No Fee	*No Fee
*Expired	VF Land Surveying Firm	*No Fee	*No Fee

Firm License Status Definitions:

A firm's ability to provide and/or offer to provide professional services in Louisiana and the amount of biennial licensure renewal fees depends on the status of its license.

Status	Description
Active	Firm has complied with all the licensure and licensure renewal requirements of the Board and may offer and/or provide professional services in Louisiana.
*Expired *status requires a completed renewal invoice or letter to notify LAPELS of expiration	Firm has failed to properly renew licensure with the Board and may no longer offer and/or provide professional services in Louisiana. To reinstate its license, the firm must submit to the Board an <i>Application to Reinstate Expired Firm License</i> .

Extract from the Louisiana Administrative Code 46:LXI.2305 (Rules of the Board):

The full text of the Licensure Law and the Rules of the Board are available by request to the Board office or from the Board's website at www.lapels.com

§2305. Supervising Professional

A.1. Each firm licensed with the board shall designate one or more supervising professionals. Each supervising professional shall be a licensed professional:

- a. whose primary employment is with the firm on a full-time basis; or
- b. whose secondary employment is with the firm, provided the supervising professional is an owner of the firm.

2. The supervising professionals of an engineering firm shall be professional engineers. The supervising professionals of a land surveying firm shall be professional land surveyors.

3. The responsibilities of a supervising professional include:
- a. renewal of the firm's license and notification to the board of any change in the firm's supervising professionals;
 - b. institution and adherence of policies of the firm that are in accordance with the licensure law and the rules of the board; and

c. ensuring that all professional services provided by the firm are performed by or under the responsible charge of a licensed professional.

B. Nothing herein shall prohibit a supervising professional from also being in responsible charge of professional services provided by the firm.

C. A failure to comply with any of the provisions of this Chapter may subject both the licensed firm and the supervising professional to disciplinary action by the board.

D. Compliance with this Section will not be met by a contractual relationship between the firm and a licensed professional or a firm of licensed professionals in which such licensed professional or firm of licensed professionals is available on a consultative basis. Nor will it be considered compliance if a licensed professional is related to the firm solely in a nominal or inactive capacity.



Credit Card Authorization Form

PLEASE PRINT OUT AND COMPLETE THIS AUTHORIZATION AND RETURN TO US
All information will remain confidential.

Cardholder Name: _____

Name on Application: _____
(if different from credit card holder)

Billing Address: _____

Phone Number: _____ Email: _____

Credit Card Type: Visa MasterCard Discover American Express

Credit Card Number: _____

Expiration Date: _____ (MM/YY)

Card Identification Number (last 3 digits on the back of the credit card): _____

Amount to Charge (USD): \$ _____

I authorize LAPELS to charge the agreed amount listed above to my credit card provided herein. I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement.

Cardholder: Print Name, Sign and Date below

Signature: _____

Print Name: _____

Date: _____

Once signed, return the completed form to:

**LAPELS
9643 BROOKLINE AVENUE, SUITE 121
BATON ROUGE, LA 70809**

OFFICE USE ONLY

Application Type _____

Confirmation Number _____