

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 \$ _____

CERTIFICATION RENEWAL INVOICE
Engineer Interns and Land Surveyor Interns

Part II - Certificate & Contact Information:

Invoice Date: February 1, 2019

Renewal Deadline: **March 31, 2019**

Biennial Period: **04/01/2019 - 03/31/2021**

Certification Type: _____ Certification #: _____

Date of Birth: _____

Email Address: _____

Phone 1: _____ Ext. _____

Phone 2: _____ Ext. _____

Part I - Name & Mailing Address:

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

Part III – Status Indicator:

I wish to renew my certification status as:

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 (other than traffic violations) since my last renewal.
2. If yes, list the jurisdiction(s) in which you were disciplined, or convicted or entered a plea of guilty or nolo contendere, and provide details. Include additional pages if necessary.

Part V – Journal & Privacy Option:

1. I would like to receive the *Louisiana Engineer & Land Surveyor Journal* via Email:
2. 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**

Part VI – Certification and Signature:

I certify that all information provided on this renewal invoice is true and correct to the best of my knowledge, information and belief. I am aware that an omission or untrue response may constitute fraud, deceit, material misrepresentation, perjury or the giving of false or forged evidence under Louisiana Revised Statutes 37:698 and 37:700.

I have read the Rules for Professional Engineers and Land Surveyors (LAC Title 46, Part LXI), and I agree to conduct my professional affairs in accordance with these rules.

Signature: _____ Date: _____

LAPELS does not issue pocket cards or certificates after renewals, please visit our website and click on "[Licensee/Intern Search](#)" to review and print your current license/certificate information.

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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.

License/Certification Type	*Status (<i>Every</i> status requires a completed renewal invoice)	Renewal Fee <i>per license</i> (if received <i>on or before</i> deadline)	Renewal Fee <i>per license</i> (if received <i>after</i> deadline)
EI/LSI	Active	\$60	\$60 (no late fee)
EI/LSI	*Expired	*No Fee	*No Fee



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 _____