



**ALABAMA STATE BOARD OF LICENSURE FOR
PROFESSIONAL ENGINEERS AND LAND SURVEYORS
PO BOX 304451
MONTGOMERY, AL 36130-4451**

Request for Duplicate Certificate

I, _____, hereby make application for issuance of a duplicate _____ (PE or LS) wall certificate of licensure. This form must be submitted along with a \$25 check made payable to PE & LS Fund.

Name as it appeared on certificate: _____

License No. _____ Date of Licensure _____

Current mailing address _____

Signature

Subscribed and sworn to before me this _____ day of _____, 20 _____.

Notary Public

Board Use Only

Date Received _____ Check # _____ Date Mailed _____