

LICENSE RENEWAL APPLICATION

IOWA ENGINEERING AND LAND SURVEYING EXAMINING BOARD

200 EAST GRAND, SUITE 350 * DES MOINES * IA * 50309
515/725-9021

BIENNIUM 2015-2016

This information is required or your application will be returned

LICENSE #

INDIVIDUALS NAME & ADDRESS (PREFERRED MAILING):

Home Business

STATUS

..... ACTIVE PE

..... ACTIVE LS

..... INACTIVE PE

..... INACTIVE LS

Mark appropriate box(es)

PE LS

PDH CARRYOVER _____

PDH SUBMITTED
Completed in 2013-2014 _____

PDH TOTAL _____

***Not required ***

PLEASE LIST AN ALTERNATE ADDRESS BELOW:

Home Business

FEES

\$100 ACTIVE

\$40 INACTIVE

\$25 Penalty if postmarked
January 1 through 30, 2015

**DO NOT USE THIS FORM
AFTER January 30, 2015**

Daytime Telephone Number:

E-mail:

PLEASE READ ALL INSTRUCTIONS ON BACK BEFORE COMPLETING THIS FORM

OUT-OF-STATE AFFIDAVIT (selecting this option will override any PDH reported above on this form)

***HOME ADDRESS REQUIRED IF SELECTING OUT OF STATE AFFIDAVIT ***

A person licensed to practice engineering and/or land surveying in this state shall be deemed to have complied with the continuing education requirement of this state during the periods that the person is a resident of another state or district which has a continuing education requirement for engineers and/or land surveyors and the individual meets all requirements of that state or district for practice therein. By checking the box in this section, I hereby certify that I hold a current license to practice engineering and/or land surveying in my state of residence, my residence state has a MANDATORY continuing education requirement, and I maintain the required number of hours to sustain an active license in that state. My state of residency is _____ as provided above.

FELONY / DISCIPLINE INFORMATION

Yes No Since your last renewal in Iowa, have you been convicted of a felony criminal offense? A "conviction" includes a guilty plea, a deferred judgment prior to discharge, and a finding of guilt before a judge or jury.

Yes No Since your last renewal in Iowa, have you been disciplined by any jurisdiction?

CERTIFICATION: By submitting this form, I attest to the following: This renewal is true and correct. If I have claimed credit for management professional development, I attest that my engineering and/or land surveying practice includes management duties.

Signature

FEES: _____ Amount to be charged / submitted

____ Payment enclosed, check or money order, payable to **State of Iowa**

____ Please charge to my _____ MasterCard _____ Visa or _____ Discover (only cards accepted)

Card #

Expiration date ____/____

Cardholder Name :

Cardholder Signature :

Did you know you can
Renew Online?

Log on to

LicensedInIowa.gov

INSTRUCTIONS FOR ELECTRONIC RENEWAL

1. To complete your renewal application electronically, you must have Internet access and must charge the renewal on either MasterCard, Visa or Discover.
2. Access the on-line professional licensing system at www.LicensedInIowa.gov
3. Use your social security number along with your license number to access the on-line professional licensing system. If your license number is a four digit number, add a zero in front of your number to total five digits.
4. Follow the instructions on the screens.

INSTRUCTIONS FOR COMPLETING RENEWAL APPLICATION

1. **NAME AND ADDRESS:** Please provide your name and address for preferred and alternate addresses.
NOTE: Name, address, license number, and status are considered public information.
2. **STATUS:** Check desired status of licensure: Active PE, Active LS, Inactive PE, Inactive LS.
3. **FEES:** Enclose the correct fee or provide credit card information in the box at the bottom of the application. You will be assessed a penalty if your renewal is postmarked after December 31. Please be sure your name and license number are on your check. **Make checks payable to State of Iowa.**
4. **PROFESSIONAL DEVELOPMENT HOURS:** Carryover from your previous renewal can be found on your current license card. Enter the PDH for which you are claiming credit in the appropriate shaded box(es) that have been completed between January 1, 2013 and the date you are submitting your renewal. Refer to 193C IAC Chapter 7 for renewal PDH requirements. **You must have the required PDH to renew your license.** Refer to 193C IAC Chapter 3 for renewal application requirements.
5. **DAYTIME TELEPHONE NUMBER:** Enter the telephone number where you can be reached during the normal business day.
6. **EMAIL:** Enter the email where you can be reached during the normal business day or regularly check.
7. **OUT-OF-STATE AFFIDAVIT:** Check this box if you qualify for this exemption as explained on the application. You must provide your home address as either the preferred or alternate mailing address. Fill in your state of residency. Selecting this option will override any PDH report on the reverse side.
8. **FELONY INFORMATION:** Check the appropriate boxes regarding felony criminal offenses and disciplinary actions. If you check either "yes" box, **YOU MUST RENEW USING THIS PAPER APPLICATION FORM.** Attach a complete and detailed explanation of each conviction/charge including the date of conviction/arrest/charge, the name and location of the court, the nature of the charge(s), the sentence imposed, and whether you have satisfied all terms of the sentence. For disciplinary actions, include a copy of the settlement agreement, Board order, or other pertinent documents.
9. **EXEMPTION REQUEST:** A letter of explanation is required if you are requesting exemption from the continuing education requirements in accordance with 193C IAC 7.6(542B,272C). If you are asking for an exemption because you were working overseas or in the military, give the exact dates and locations. In the case of hardship, explain the circumstances and include exact dates as well as supportive documentation. **If you choose this option, YOU MUST RENEW USING THIS PAPER APPLICATION FORM.**
10. **COMPLIANCE REVIEW:** A random sampling of licensees is chosen for compliance review each year. The random sampling will be drawn after the renewal period. If you are selected for compliance review, you will be notified and required to provide documentation for the professional development hours claimed on this application.