



STATE BOARD OF REGISTRATION FOR PROFESSIONAL
ENGINEERS AND SURVEYORS
 77 SOUTH HIGH STREET SUITE 2472
 COLUMBUS, OHIO 43215
 PHONE 614-466-3651 WWW.PEPS.OHIO.GOV

REINSTATEMENT OF LICENSURE – INFORMATION REQUEST

TO BE COMPLETED BY APPLICANT

NAME

MAILING ADDRESS LINE 1

MAILING ADDRESS LINE 2 (ONLY IF NEEDED) U.S. SSN (LAST 4 ONLY)

CITY, STATE, ZIP EXAM/LICENSE INFORMATION COMING FROM WHAT STATE?

HAS THE APPLICANT'S REGISTRATION/LICENSE BEEN DELINQUENT OR INTERRUPTED FOR ANY REASON?

NO YES IF YES, PLEASE EXPLAIN

TO BE COMPLETED BY AUTHENTICATING U.S. BOARD – FOR REINSTATEMENT OF LICENSURE

APPLICANT IS REGISTERED AS:

	LICENSE NUMBER	ISSUED DATE	EXPIRATION DATE
<input type="checkbox"/> P.E. PROFESSIONAL ENGINEER	_____	_____	_____
<input type="checkbox"/> P.S. PROFESSIONAL SURVEYING	_____	_____	_____

HAS DISCIPLINARY ACTION BEEN TAKEN AGAINST THE APPLICANT?

NO YES IF YES, PLEASE EXPLAIN AND INCLUDE SUPPORTING DOCUMENTATION

INFORMATION PROVIDED BY:

PRINTED NAME, TITLE

SIGNATURE DATE
