

Applicant # _____

STATE OF NEW HAMPSHIRE

BOARD OF LICENSURE FOR LAND SURVEYORS

RE-APPLICATION TO SIT FOR THE PLS/NHL EXAMINATION/S

(You must fill out an application each time you sit for the exam)

Each applicant shall submit a **typewritten** re-application form with the \$200.00 fee for the PLS and the \$125.00 fee for the NHL exam. Make checks payable to: Treasurer, State of New Hampshire. **(Non-refundable)**.

a. Name in full _____

b. Maiden name _____

c. Residence address _____ ()*

d. School or business address _____

_____ ()*

***Indicate mailing address by marking X in parenthesis**

e. Home Number _____ Work Number _____

f. E-mail address _____

g. Present position _____

h. Place of Birth _____ Date of Birth _____

i. Have you taken the PLS exam in any other state since last taking it in NH? Yes ___ No ___

j. Have you ever been barred from sitting for the PLS exam in any state? Yes ___ No ___

If yes, please explain on a separate sheet of paper the circumstances under which you were barred.

This form and appropriate exam fee/s must be received by the Board by January 1 for the April exam and July 1 for the October exam or your application will be denied.

Affidavits

The undersigned, being duly sworn, upon his/her oath deposes and says that he/she is the person making the foregoing statements and that they are made in good faith and are true in every respect.

Signature of Applicant

Address all communications to:

N.H. Joint Board
57 Regional Drive
Concord, N.H. 03301-8518

Find us on-line at www.nh.gov/jtboard/home.htm

REV. 12/09/08