

**RETURN THIS CHECKLIST WITH YOUR APPLICATION**

**APPLICATION CHECKLIST**

\_\_\_\_\_  
Candidate Name

Before you mail your application to the Board, please check the following items carefully. Your attention to these details will make it possible for the Board Staff to process your application without delay.

Have you:

\_\_\_\_\_ Marked the box on the application form indicating which address you want us to use?

\_\_\_\_\_ Requested your college/university to send us your transcript directly?

\_\_\_\_\_ Completed the "References" portion of the application, sent reference forms and Board addressed and stamped envelopes to each of your references, and kept a blank copy of the form for yourself?

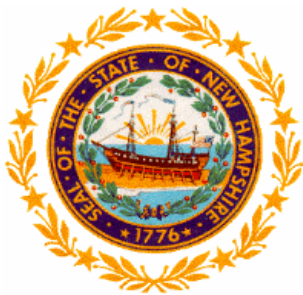
\_\_\_\_\_ Filled in the detailed project information on Section 9?

\_\_\_\_\_ **Included a sample of your land surveyor seal?**

\_\_\_\_\_ Signed the application?

\_\_\_\_\_ Included the correct fee with the check made payable to **Treasurer, State of NH** or completed the attached credit card sheet?

\_\_\_\_\_ Included this Checklist with your application?



APPL # \_\_\_\_\_

For office use only

**STATE OF NEW HAMPSHIRE**  
**APPLICATION FOR TEMPORARY PERMIT**  
**FOR LAND SURVEYING**

**APPLICATION FEE: \$300.00**

Make Check Payable to "Treasurer, State of NH (Non-Refundable)  
The Application Must be filled out completely and be legible.  
Temporary permits shall be granted if the Board determines that the applicant  
meets or exceeds the requirements of Lan 302.02, 302.03 and 303.01.

**1. General Information**

Name \_\_\_\_\_  
Last First Middle

Names Previously Used (if applicable) \_\_\_\_\_

Present Position (Organization & Title) \_\_\_\_\_

Business Address \_\_\_\_\_ ( )  
zip code

Business Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Project Title \_\_\_\_\_ Location \_\_\_\_\_

Place of Birth \_\_\_\_\_ DOB \_\_\_\_\_

Social Security # \_\_\_\_\_

**2. Registration/Licensure Information**

Have you ever been certified as a Surveyor-In-Training? \_\_\_\_\_

If so, indicate State, Certificate #, Date of Certification: \_\_\_\_\_

Total number of hours of written examination/s (indicate "none" if no written exam was taken): \_\_\_\_\_

State in which first registered or licensed as a Land Surveyor \_\_\_\_\_

Licensed by NCEES Examination? \_\_\_\_\_ If not how? \_\_\_\_\_

If so, location, date and grade awarded: \_\_\_\_\_

Date of Licensure \_\_\_\_\_ License Number \_\_\_\_\_ Is License now in force? \_\_\_\_\_

If not in force, indicate why \_\_\_\_\_

Have you ever applied for land surveyor licensure in New Hampshire? \_\_\_\_\_ Status \_\_\_\_\_

**Professional Licenses:** List all states where you hold or have held licensure. Use a separate sheet if necessary. Verification of current registration is needed from at least one state as well as verification from the state(s) where examination(s) was administered. A form will be provided upon receipt of this application packet.

License #	State	Year Licensed	Hours Written Examination	Reciprocity or Grandfather	Active or Lapsed
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

### 3. General Information Questions

CHECK ONE:

YES      NO

1. Have you ever been convicted of any felony or any misdemeanor, or a violation involving land surveying or the practice of land surveying. If so, name the court, the details of the offense and the date of conviction and the sentence imposed.
2. Have you ever lost or been denied registration/licensure as a land surveyor or disciplined by another licensing board in any other state and if so, an explanation of the circumstances?
3. Has any License ever been revoked, if so why?

**If the answer is yes to any of the above questions, submit a written explanation with your application**

### 4. Membership in Professional or Scientific Associations

Name of Organization	Location	Grade or Membership	Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____





---

Specific Location of Project \_\_\_\_\_

Town tax map – Page and parcel # \_\_\_\_\_

Briefly describe the project \_\_\_\_\_

---

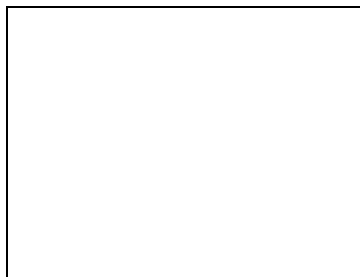
Estimated:    Field time \_\_\_\_\_  
                  Registry time \_\_\_\_\_  
                  Computation time \_\_\_\_\_  
                  Drafting time \_\_\_\_\_  
                  Licensed Supervision time \_\_\_\_\_  
                  Any other time required \_\_\_\_\_

### 9. Affidavits

I have read the contents hereof and clearly understand that the correctness and truth of my statements as recorded in this application are material, not only to the issuance of the temporary permit, as applied for, but also to the retention of said permit, if issued.

\_\_\_\_\_  
(Signature of Applicant)

**Please place a sample of the seal below, that you intend to use on your plans. This stamp must be the one indicated in the temporary permit information. Upon approval, this certificate shall bear a Temporary Permit Stamp by the Board to accompany your plans to the registry.**



**AFFIX LLS SEAL IN BOX ABOVE**

ADDRESS ALL COMMUNICATIONS TO:

N.H. JOINT BOARD  
57 REGIONAL DRIVE  
CONCORD, N.H. 03301

*Find us on-line at [www.nh.gov/jtboard/home.htm](http://www.nh.gov/jtboard/home.htm) 5/22/09*

Dear Sir or Madam:

The individual named on the attached form is an applicant before this Board for Licensure as a Land Surveyor and has submitted your name as a reference who is familiar with his/her qualifications. The records of this board, under New Hampshire Statutes, are public information. In making this application, the following authorization and release, properly signed and notarized, was made:

“I authorize those whom I have given as references, whether they be an individual, a company, or an institution to furnish the New Hampshire Board of Licensure for Land Surveyors information concerning my education, experience, character, and suitability for practicing land surveying. I agree to release and hold harmless any individual, company, or institution and any persons connected therewith from liability imposed by law in furnishing such information.

“I further authorize the Board of Licensure to classify this information as confidential and not subject to public scrutiny under the Right to Know Laws, N.H. RSA Chapter 91-A. The Board of Licensure may evaluate this information at non public sessions and keep confidential both the information and the Board’s evaluation thereof.”

This Board is required to license only those applicants who meet the licensure standards which are designed for the protection of life, health, and property of New Hampshire Citizens. We trust the above mentioned release will permit you to provide an appraisal which will enable the Board to make a fair evaluation of this applicant’s qualification.

A prompt return of the enclosed reference form will be appreciated.

NEW HAMPSHIRE BOARD OF LICENSURE FOR LAND SURVEYORS

**STATE OF NEW HAMPSHIRE  
BOARD OF LICENSURE FOR  
LAND SURVEYORS**

Reference No. \_\_\_\_\_ Reference Name \_\_\_\_\_

Please Print

Applicant \_\_\_\_\_ LS. Appl. # \_\_\_\_\_ (for office use only)

**To the Party listed above:**

You have been listed as a reference by the above named applicant for licensure as a Land Surveyor. The following information is requested to assist the Board in determining the qualifications of the applicant as required by law.

If you feel that you cannot properly evaluate the candidate, please return this form to the NH Board of Licensure for Land Surveyors and, in confidence, we will request that the candidate provide a further reference.

**Definition of LAND SURVEYOR (RSA 310-A:54 II)**

A "Land Surveyor" is a professional specialist in the technique of measuring land, educated in the basic principles of mathematics, the related physical and applied sciences, and the relevant requirements of law for adequate evidence and all requisite to the surveying of real property and engaged in the practice of land surveying as defined (in the law).

**THIS IS CONFIDENTIAL INFORMATION FOR USE OF BOARD MEMBERS ONLY**

How long have you known the applicant? \_\_\_\_\_ years.

Do you consider that he/she fulfills the above definition? \_\_ Yes \_\_\_\_\_ No

It is required that three persons serving as references be licensed land surveyors (preferably one of which should be or has been an immediate supervisor). If you are serving in either of these capacities, please indicate your state of registration/licensure and number.

State \_\_\_\_\_ LS# \_\_\_\_\_

State \_\_\_\_\_ LS# \_\_\_\_\_

State \_\_\_\_\_ LS# \_\_\_\_\_

**We prefer to have an in depth qualified reference so it is imperative that you fully consider your comments. Only you can ascertain the candidate's qualifications. The Board must depend upon you for this information.**

1. To your knowledge, does the applicant have practical experience in deed research, drafting of deed descriptions, etc., preparatory to the conveyance of land? Please specify!

2. To your knowledge, is the applicant adequately informed of the rules of evidence and boundary law to effectively perform the duties ordinarily required of a land surveyor? Please specify!

If you believe the candidate has this knowledge, could you give an estimate of the period of time the candidate has been performing these duties.

Page 2 of 4

3. To your knowledge, has the candidate spent a portion of his/her professional career in responsible charge in a survey office? If you believe the candidate has spent a portion of his time in direct supervisory charge, could you give an estimate of the period the candidate has been performing these duties.

4. Are you aware of anything which reflects adversely on the integrity or general good character of the applicant?

5. If you are acting in any capacity other than a licensed land surveyor and you are in a position to pass judgment on the adequacy of the candidate's work, please explain under what conditions you are familiar with his/her work.

Page 3 of 4

Please make any further comments which you feel will help the Board in determining the applicant's suitability for licensure as a land surveyor.

**I make the above statements with full knowledge that the person referred to is making application for licensure by the State of New Hampshire as a Land Surveyor, and this information will be filed with the person's application.**

Date \_\_\_\_\_ 20\_\_\_\_ Written Signature\_\_\_\_\_

---

**After completing this form, please mail to:**  
**State of New Hampshire**  
**Joint Board of Licensure & Certification**  
**57 Regional Drive**  
**Concord, N.H. 03301**

*Find us on-line at [www.nh.gov/jtboard/home.htm](http://www.nh.gov/jtboard/home.htm)*

Date\_\_\_\_\_

College or University Registrar

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dear Registrar:

Enclosed please find my fee in the amount of \$\_\_\_\_\_ in payment for a certified transcript of my scholastic record. I attended college during the years \_\_\_\_\_ to \_\_\_\_\_. I received my degree on \_\_\_\_\_  
\_\_\_\_\_. My Social Security number is \_\_\_\_\_ and my date of birth is \_\_\_\_\_.

My student identification number was\_\_\_\_\_.

Please send the transcript ***directly*** to the following address:

New Hampshire Joint Board of Licensure  
57 Regional Drive  
Concord, New Hampshire 03301-8518

The Board of Land Surveyors have informed me that they will treat the transcript in accordance with the provisions of the Education Rights Privacy Act and that no unauthorized person will have access to the transcript.

Sincerely,

\_\_\_\_\_  
(Signature)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
(Printed Name and Address)

## CREDIT CARD FORM

**You may pay your application fee with a credit card by filling out this form. Please make sure that all information is correct and up to date. This page will be destroyed after the transaction has taken place.**

Amount Due: \_\_\_\_\_

Card Type: (please circle one) Visa    Mastercard    **(required)**

Card Number: \_\_\_\_\_ **(required)**

Expiration Date: Month: \_\_\_\_\_ Year: \_\_\_\_\_ **(required)**

**Billing Name and Address (your billing address must match the address associated with the credit card you are using.)**

Name on Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Province: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_