## NEW MEXICO BOARD OF LICENSURE FOR PROFESSIONAL ENGINEERS AND PROFESSIONAL SURVEYORS

## 2024 LICENSE RENEWAL FORM

COMPLETE, SIGN, DATE AND RETURN WITH RENEWAL FEE TO:
P.O. BOX 1967 ◆ SANTA FE, NEW MEXICO 87504

Licensee Name		,			
Mr. Ms. First Name		Middle Name (or Initial)		Last Name	
License Number		License Type	PE -\$155	PS - \$155	PEPS - \$310
Birthdate		Phone Number			
Mailing Address		City		State	Zip Code
Email Address					
	onsible for the renewal ng and Surveying Pract				
	Fee & Renewal Fo	orm Due in Office by	DECEMBER	31, 2024	
If your license	renewal form is not sub licensee must immed	mitted by December 31 <u>liately <mark>refrain</mark> from pra</u>			ired, and the
Active-Duty Military Physical Disability >  Retired or Inactive State requires board approval. (The Inactive State requires board approval. (The Inactive State convictions.) Yes (If yes, provide details, Within the last 2 years, have	12 months > Please provi Service (Call-up in excess of Requires approval by the rus > Retired and Inact This renewal form is not recess, or any state, territory, of No, for example: date(s) of	de license issue date: of 120 days) > Attach ned e Board. To apply for Medic ive Status must be requ quired. The Retired and In er been convicted, plead gu r county thereof, which is a of crime, charges, cour had your license revoked,	(1.25 PD) ressary document cal Exemption, p rested prior to active Status app milty, or entered a refelony? (Referent torder/decision by any licensing l	H per month requitation. lease contact the licensure expirilications are available plea of nolo contact appendix A. for precord(s) of poard?	coard office.  ration date. Status lable on our website.)  endere to any crime under or the list of criminal  rjudgmentetc.)
I have read the Practice Act § a surveyor, you must also ha	§§ 61-23-1 through 61-23-36	5 NMSA (2023) and rules (Ti	tle 16.39.1 through	16.39.8 NMAC). If	•
• • •	copy of the statutes and rules			· ·	
I affirm under the penalties I hereby certify that I have t professional development t a) <i>Professional Eng</i>	s of perjury that I understar met the exemption request raining pursuant to 16.39.2 <b>uneer</b> – that specialty of er	requirements [above] or h 2 NMAC as follows:	questions truthfu ave achieved the ing, <b>b) <i>Professi</i>e</b>	minimum requir onal Surveyor	my knowledge. ed hours per biennium of – professional surveying, or
Signature:				Date:	
	[Falsification of s	signature is subject to o	disciplinary ac	ction.]	
NO CREDIT CAR	DS ACCEPTED	For Office U	Jse Only		Date Received
Make Checks or Money Orders payable to:		Check #		_	
NMBLPEPS			Money Order #		
axed forms are not acceptable. Renewal form must be submitted with payment or will be returned.		Amount: \$		_	
		Receipt #			
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