

**Arkansas State Board of Licensure  
For Prof. Engineers & Prof. Surveyors**

PO Box 3750  
Little Rock, AR 72203-3750  
Telephone: 501-682-2824 Fax: 501-682-2827  
www.arkansas.gov/pels

**01/01/2019-12/31/2020 Renewal Notice for  
Certificate of Authorization (COA)–License Ends in Even Number**

**Board Use** Date Rec'd: \_\_\_\_\_

Receiver Initials: \_\_\_\_\_

Applicant Type: **Firm**  Other Payment received

Type Payment:  Cashier's Check  Company Check  
 MO (Money Order)  Personal Check  Temp  
Check

Payment Identifier (number): \_\_\_\_\_

**Total Payment: \$100 \$150 \$200**

<b>Receipt Type(s):</b> Renewal Fee – COA	\$100.00
Renewal Fee – COA – Late (1-60 days)	\$ 50.00
Renewal Fee – COA – Late (61+ days)	\$100.00

**YOUR LICENSE WILL EXPIRE DECEMBER 31, 2018**

**Certificate of Authorization Renewal Fee:**  
\$100.00 – If postmarked prior to Dec 31

To avoid a lapsed license, this completed form and payment (payable to PELS Fund) **MUST BE POSTMARKED NO LATER THAN DECEMBER 31. Please write your license type number on your payment.**

**IF NOT RENEWED, YOUR LICENSE WILL LAPSE AND RENEWAL FEES WILL INCREASE AS FOLLOWS:**

\$150.00 – January 1 to February 28, 2019  
\$200.00 – March 1, 2019 to December 31, 2020

**NOTICE** renew online and your renewal is processed within 24 hours compared to the 1-2 weeks that a paper copy requires.

COA #: \_\_\_\_\_  
Firm Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip+4: \_\_\_\_\_ - \_\_\_\_\_

Same as above (includes Zip+4 obtained at [www.usps.com](http://www.usps.com))  
 Change Address: \_\_\_\_\_  
Ste.: \_\_\_\_\_ Bldg/Floor (if applicable): \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip+4: \_\_\_\_\_ - \_\_\_\_\_  
E-Mail: \_\_\_\_\_  
Primary Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Ext: \_\_\_\_\_  
Secondary: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Ext: \_\_\_\_\_  
Fax: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**NOTICE! You may renew on-line with a credit card by going to [www.pels.arkansas.gov](http://www.pels.arkansas.gov)  
NO TRANSACTION FEE REQUIRED FOR RENEWALS PROCESSED ONLINE!**

Please select the following options that are applicable:

- Our firm requests to change our name to:** \_\_\_\_\_
- Our firm requests our COA be renewed as our firm offers/provides the following service(s).** For each service we offer/provide, we have designated the following individual(s) \*\* as being in responsible charge and duly licensed in Arkansas.
  - Engineering**

P.E. Licensee Name	Title	AR P.E. Lic. #	Exp. Date
_____			
  - Surveying**

P.S. Licensee Name	Title	AR P.S. Lic. #	Exp. Date
_____			
- Our firm requests our license be placed in a Non-Renewed Status.** This form is being returned without fees and removes our name from future mailings.

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

\*\* Arkansas requires at least one employee to be listed for each service offered/provided.