

**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

**01/01/2022-12/31/2023 Renewal Notice for
Engineer Intern – License Ends with Odd Number**

YOUR LICENSE WILL EXPIRE DECEMBER 31, 2021

Engineer Intern Renewal Fee:

\$10.00 – If postmarked prior to December 31

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

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

\$15.00 – January 1 to February 28, 2022

\$20.00 – March 1, 2022 to December 31, 2023

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

Name: _____ EI #: _____

Address: _____

City: _____ State: _____ Zip+4: _____ - _____

Same as above Change Address to (check one): Home: Other: School: Work:

If Other or School enter Name: _____

If Work, enter Company Name: _____

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

Answer the following 3 questions – provide copies of orders, pleadings, and/or correspondence as supporting documentation for any affirmative answer:

1. Are there any complaints or enforcement actions pending against you by another licensing board? YES:___ NO:___
2. Have you ever been disciplined by another Board(s) which resulted in enforcement actions? YES:___ NO:___
3. Have you ever been convicted of a felony or misdemeanor crime (other than traffic violations)? YES:___ NO:___

Select one of the following options:

- I request my license be renewed and my fee(s) are enclosed.
- I request my license be placed in a Non-Renewed Status. This form is being returned without fees and removes my name from future mailings.

CERTIFICATION – I acknowledge that any person who gives false evidence in the attempt to obtain licensure shall be subject to disciplinary action by the Board.

Printed Name: _____ Date: ____/____/____

Signature: _____ EI # _____

BOARD USE ONLY: Receiver Initials: _____
Date Received: _____

Applicant Type: Licensee Other Payment received

Type Payment: Cashier's Check Company Check

Money Order Personal Check Temp Check

Payment Identifier: _____

Total Payment: \$10 \$15 \$20

Receipt Type(s): Renewal Fee – **Engineer Intern** \$10.00

Renewal Fee – Engineer Intern – Late (1-60 days) \$ 5.00

Renewal Fee – Engineer Intern – Late (61+ days) \$10.00