



670 Hawthorne Avenue, SE
Suite 220
Salem, Oregon 97301

tel. 503.362.2666
email: osbeels.info@oregon.gov
Web: www.oregon.gov/osbeels

Request for Reinstatement **of Registration(s) and/or Certification for Professional Engineers, Professional Land Surveyors, Registered Professional Photogrammetrists, and Certified Water Right Examiners**

The following instructions are provided to assist in completing the Request for Reinstatement form.

PLEASE READ the applicable Oregon Revised Statutes (ORSs) and the Oregon Administrative Rules (OARs). To locate the ORSs and the OARs, visit our Web site at www.oregon.gov/osbeels. Click on the "Rules & Statutes" link in the top bar to review the relevant ORSs and OARs.

PLEASE NOTE: Retired registrants and/or certificate holders may, within a period of five (5) years from retirement, return to active status.

Individuals, who have been in the retired status for a longer period, must submit an application for registration.

It is the registrant's responsibility for reviewing these requirements when requesting to reinstate a registration as a professional engineer (PE), professional land surveyor (PLS), registered professional photogrammetrist (RPP), and/or certification as a certified water right examiner (CWRE).

Who Should Fill Out the Request for Reinstatement form?

Registrants and/or certificate holders who want to reinstate a professional registration(s) or certificate from the retired or inactive status.

See the following ORS and OARs for detailed information: ORS 672.180 and OAR 820-080-0010, OAR 820-010-0505, OAR 820-010-0520, and OAR 820-010-0635.

Reinstatement Fees

\$225.00 – Reinstatement fee from retired status (for each registration and/or certification request)

\$50.00 – Reinstatement fee from inactive status (for each registration and/or certification request)

\$190.00 – PE Biennial Renewal

\$190.00 – PLS Biennial Renewal

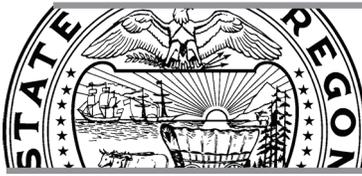
\$190.00 – RPP Biennial Renewal

\$40.00 – CWRE Biennial Renewal

See the following OARs for detailed information: OAR 820-010-0505, OAR 820-080-0010, and OAR 820-010-0505.

How Requests are Processed

Requests will be processed according to the date received by the OSBEELS office.



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GENERAL INSTRUCTIONS

- Step 1: Complete forms.
- Complete the Request for Reinstatement form;
 - Complete the continuing Professional Development (CPD) Organizational form;
 - Evidence of maintaining a current registration or certificate in another jurisdiction throughout the period the registrant or certificate holder has been in inactive status in Oregon (if necessary); and
- Step 2: Gather completed forms and put together in a single package for mailing.
- Step 3: Send package, including payment to the Oregon State Board of Examiners for Engineering and Land Surveying (OSBEELS):
- OSBEELS
670 Hawthorne Avenue, SE
Suite 220
Salem, OR 97301
- Step 4: If correspondence has not been received from the OSBEELS within 60 days of submittal, please contact us.



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Office Use Only - Date Received:

Office Use Only -
Date Entered/Paid:

Office Use Only - ID #

Request for Reinstatement

Registrant Contact Information			
First name (personal name)	Middle name or initial	Last name (family name)	
If you have a Social Security number Oregon law requires that it be used. Only use a Passport number if you don't have a Social Security number.			
<input type="checkbox"/> Social Security #	OR <input type="checkbox"/> Passport #	Country issuing passport	
Birth date (Mo/Day/Yr)	Where do you want correspondence mailed to?		
	<input type="checkbox"/> Home address OR <input type="checkbox"/> Business address		
Mailing address (include any apartment numbers)			Home/Personal Phone #
City	State or Province	Zip/Postal code	Home email address
Business Name		Business Phone #	Business Fax #
Business address (include any suite numbers)			
City	State or Province	Zip/Postal code	Business email address

General Information

I request to place my: PE PLS RPP CWRE registration(s) and/or certificate into the active status, as defined in Oregon Administrative Rule (OAR) 820-010-0510.

- I have attached the CPD Organizational Form.
- I have enclosed evidence of maintaining a current registration or certificate in another jurisdiction throughout the period that I have been in inactive status in Oregon (if reinstating from inactive status).
 - I requested verification of my license through the NCEES License/Exam Verification system on: _____ (print date)
 - I recieved verification of my license through a State/Territory not participating in NCEES system:
 - AZ MT NY PA SD VT WI Guam Puerto Rico



General Questions

Answer the following questions (see OAR 820-020-0045)

Have you ever had any criminal convictions relating to the profession for which you are applying?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has your professional registration ever been denied, revoked, suspended, surrendered, stipulated, on probation, or been subject to any restriction or disciplinary action in any jurisdiction?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If the answer is "yes" to any of the above stated questions, please submit a written explanation.

All information provided with your response will be considered public information unless required to be kept confidential by state or federal law.

Social Security Guidelines

As part of your application for an initial or renewed occupational, professional or recreational license, certification, or registration issued by OSBEELS, you are required to provide your Social Security Number to OSBEELS. This is mandatory. The authority for this requirement is ORS 25.785, ORS 293.226, ORS 305.385, 42 USC § 405 (c) (2) (C) (I), and 42 ISC § 666 (a) (13). **Failure to provide your Social Security Number will be a basis to refuse to issue or renew the license, certification, or registration you seek.** This record of your Social Security Number will be used for child support enforcement, tax administration purposes (including identification), and collection actions only, unless you authorize other uses of the number. Although a number other than your Social Security Number appears on the face of the licenses, certificates, or registrations issued by OSBEELS, your Social Security Number will remain on file with OSBEELS.

If, the United States Social Security Administration has not issued you a social security number, you must follow these guidelines:

- a. form must be signed by you;
- b. You are attesting to the fact that no social security number has been issued to you by the United States Social Security Administration; and
- c. are acknowledging that knowingly supplying false information under this section is a Class A misdemeanor, punishable by imprisonment of up to one year and a fine of up to \$6,250.

By providing the following signature, you are agreeing to comply with the guidelines listed above.

Signature	Date (Mo/Day/Yr)
.....

I hereby certify under penalty of perjury that the information provided on this reinstatement request together with accompanying documents and all enclosed materials is true and correct. I am the registrant named in this reinstatement request, I have read the contents thereof and, to the best of my knowledge and belief, the foregoing statements are true and correct in every respect.

Signature	Date (Mo/Day/Yr)
.....



Please check the applicable boxes and enclose the appropriate amount for each request

<input type="checkbox"/> Reinstatement fee:	Total reinstatement fee:
\$225.00 – Reinstatement fee from retired status (for each registration and/or certification request)	
\$50.00 – Reinstatement fee from inactive status (for each registration and/or certification request)	

<input type="checkbox"/> PE Biennial Renewal - \$190.00	<input type="checkbox"/> PLS Biennial Renewal - \$190.00
<input type="checkbox"/> RPP Biennial Renewal - \$190.00	<input type="checkbox"/> CWRE Biennial Renewal - \$40.00

Select payment method (choose one)

<input type="checkbox"/> Check or Money Order (payable to the OSBEELS)	<input type="checkbox"/> Cash	Amount Enclosed:	
<input type="checkbox"/> Debit or Credit Card (Visa, Mastercard, Discover, or AmEx)		Total Charge to Card:	
Card Number	Exp. Date	Security Code*	Billing Zip/Postal Code
Signature (serves as payment authorization if paying by debit or credit card)			Signature Date (Mo/Day/Yr)

*** Debit or Credit Card Security Codes**

If submitting a payment to the OSBEELS for fees by debit or credit card, please provide the security code. These codes are a security feature that appears on the back of most Visa, MasterCard, and Discover cards, and on the front of American Express cards. This code is a three or four-digit number which provides a cryptographic check on the information embossed on the card.

American Express Card Users: Look for the 4-digit code printed on the front of the card just above and to the right of the main card number. This 4-digit code is the card security code. Visa, MasterCard, and Discover Card Users: Flip the card over and look at the signature box. A special 3-digit code will be located in the signature box. This 3-digit code is the card security code.



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**ATTESTATION AND REQUEST FOR EXEMPTION
 FROM SOCIAL SECURITY NUMBER REQUIREMENT**

I, _____, attest and certify that I have not been assigned a U.S. Social Security number, and agree that if a U.S. Social Security Number is assigned to me, I will report it to the Oregon State Board of Examiners for Engineering and Land Surveying within 30 days.

I understand that, under Oregon law, providing false information is grounds for denial, suspension, or revocation of registration issued by the Oregon State Board of Examiners for Engineering and Land Surveying.

Signature	Date (Mo/Day/Yr)