#####  **Application Form LICENCE TO PRACTICE**

**For surveyors holding a provincial commission**

###### Surname:             ☐ Dr. ☐ Mr. ☐ Ms. ☐ Mrs.

###### Given Name(s):

Company or Organization :

Provincial Association :

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### If you are submitting this application along with a Membership application, skip this section. If you are already a member, complete this section only if there are changes to your existing registration.

Office Address :

City :            Prov. / Terr.:             Postal Code:

Tel. :             Ext. :             Fax :

Email :             Web site:

Residence Address :

City :             Prov. /Terr.:            Postal Code:

Tel. :             Fax :

Email :

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**Please enclose the following dues and items:**

☐ Annual Licence Fee ($320 or prorated amount) and a $25 fee for filing the Affidavit of

 Training and Experience.

**☐** Proof of liability insurance coverage, or proof of exemption therefrom.

☐ Affidavit or Statutory Declaration of Experience and Practical Training.

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I hereby apply for Licence to Practice  **Approved by**

………………………………………………. ……………………………………………….

Signature Date Registrar Date

**Please indicate method of payment:**

***To pay through our secure gateway, go to the “form” section and click the appropriate icon.***

☐ Cheque enclosed ☐ MasterCard ☐ Visa

 **Name of Credit Card Holder:**

**Card Number:** **Expiry Date:** **CVV:**

……………………………………………………….. ……………………………………………

Signature Date