



Application Form LICENCE TO PRACTICE

For surveyors holding a provincial commission

Surname: _____ Dr. Mr. Ms. Mrs.
Given Name(s): _____
Company or Organization : _____
Provincial Association: _____

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 : _____

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

Card Number _____

Expiry Date _____

.....
Signature

.....
Date