

IOWA ENGINEERING AND LAND SURVEYING EXAMINING BOARD
200 E. GRAND, STE. 350, DES MOINES, IA 50309
SUCCESSFUL EXAMINEE LICENSURE FORM PLS

Licenses expire biennially on December 31. Licenses initially issued in even-numbered years expire in odd-numbered years. Licenses initially issued in odd-numbered years expire in even-numbered years.

For Examinees Submitting January 1 – June 30

LICENSE FEE: \$100 (if received and processed by July 1)
LICENSE FEE: \$75 (initiates licensure in July; do not mail until after June 25)
CERTIFICATE FEE \$15 (optional wall certificate)

For Examinees Submitting July 1 – December 31

LICENSE FEE: \$75 (if received and processed by January 1)
LICENSE FEE: \$100 (initiates licensure in January; do not mail until after December 25)
CERTIFICATE FEE \$15 (optional wall certificate)

Enclose payment with this form and mail to:
Iowa Engineering and Land Surveying Examining Board
200 East Grand, Ste. 350
Des Moines, IA 50309.

You may also pay by credit card by completing the form below and faxing to (515) 725-9032. Please allow 5-7 business days for processing. **IMPORTANT:** Print or type your name as you want it to appear on your certificate.

Name: _____

Street: _____

City: _____ State: _____ Zip: _____

E-mail address: _____

Date Passed National PLS Exam _____ NCEES ID # _____

Date Passed Iowa State Specific Land Surveying Exam _____

Contact the Iowa Board if you have questions or need further assistance. 515-725-9021

Payment due within 30 days. Your license and certificate (if applicable) will be mailed thereafter. When your license has been issued, you can search by your name as it appears above at www.licensediniowa.gov.

____ Payment enclosed, check or money order, payable to State of Iowa

____ Check #: _____ Business or Personal (circle one)

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Please charge to my: \_\_\_\_\_ MasterCard \_\_\_\_\_ Visa \_\_\_\_\_ Discover

Fees: \$ \_\_\_\_\_ (Amount to be charged)

Card #: \_\_\_\_\_

Expiration date: \_\_\_\_\_ / \_\_\_\_\_

Cardholder's Name: \_\_\_\_\_

Signature: \_\_\_\_\_