



**STATE OF RHODE ISLAND**  
**Bd. of Registration for Professional Land Surveyors**  
 1511 Pontiac Ave, Building 68-2  
 Cranston, RI 02920  
 (401) 462-9592 Fax: (401) 462-9532  
 www.bdp.state.ri.us

**VERIFICATION OF REGISTRATION**

**STATE BOARD NAME & ADDRESS**

**APPLICANT'S NAME & ADDRESS**

Please return this form directly to the applicant in a sealed envelope.

To: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Social Security No: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_

**I. THE ABOVE NAMED PERSON WAS REGISTERED AS:**

	<u>Certificate No.</u>	<u>Date Issued</u>	<u>Valid until</u>	<u>Date Applied</u>
LAND SURVEYOR-IN-TRAINING <input type="checkbox"/> LSIT	_____	_____	_____	_____
PROFESSIONAL LAND SURVEYOR <input type="checkbox"/> PLS	_____	_____	_____	_____

**II. EXAMINATION: (THE RHODE ISLAND BOARD REQUIRES EXAM SCORES)**

1. WRITTEN EXAMINATION

	<u>Hours</u>	<u>Score</u>	<u>Waived</u>	<u>Exam Date</u>	<u>NCEES (Yes/No)</u>
Fundamentals of Land Surveying (LSIT)	_____	_____	_____	_____	_____
Principles & Practice of Land Surveying (PLS)	_____	_____	_____	_____	_____

1. COMPUTER BASED TESTING

	<u>Hours</u>	<u>Score</u>	<u>Waived</u>	<u>Exam Date</u>	<u>NCEES (Yes/No)</u>
Fundamentals of Land Surveying (LSIT)	_____	_____	_____	_____	_____
Principles & Practice of Land Surveying (PLS)	_____	_____	_____	_____	_____

3. ORAL EXAMINATION: LSIT Hours: \_\_\_\_\_ PLS Hours: \_\_\_\_\_

4. LSIT ACCEPTED FROM: \_\_\_\_\_

5. PLS ACCEPTED FROM: \_\_\_\_\_

**III. QUESTIONS:**

	<u>Yes</u>	<u>No</u>
1. Has any disciplinary action ever been taken against the applicant?	_____	_____
2. Are any disciplinary charges pending against this applicant?	_____	_____
3. If so, has this disciplinary case(s) been satisfied to the Board's requirements?	_____	_____

**IV. IF YES, PLEASE USE OTHER SIDE FOR FURTHER EXPLANATION OR COMMENTS.**

AUTHORIZED SIGNATURE: \_\_\_\_\_

TELEPHONE NO. \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_