



**State of Rhode Island**  
**DEPARTMENT OF BUSINESS REGULATION**  
**DIVISION OF BUILDING, DESIGN AND FIRE PROFESSIONALS**  
**STATE BUILDING OFFICE**  
**560 Jefferson Blvd, Suite 100**  
**Warwick, Rhode Island 02886**

**BOARD OF REGISTRATION FOR PROFESSIONAL LAND SURVEYORS**

**LAND SURVEYOR GENERAL REFERENCE FORM**

**Section 1: Must be completed by the Applicant**

Applicant shall complete the first section of this form and send this form to the named reference along with a self-addressed, stamped envelope, for the reference to return to this form back to the Applicant. Applicant shall collect all sealed envelopes and submit them to the Board in one complete package of supplemental forms.

For more instructions, please refer to the Board's website: <https://bdp.ri.gov/land-surveyors/apply>.

**Name of Applicant:** \_\_\_\_\_

**Name and Contact Information of Reference**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

I have filed my application for registration as a PLS with the Rhode Island Board of Registration for Professional Land Surveyors. I have listed your name as one of my statutorily required five (5) references, three (3) references must be from a registered PLS.

Please complete the below form and send the completed form directly back to me in the self-address stamped envelope that I have provided.

\_\_\_\_\_  
Signature of Applicant

**Sections 2 and 3 shall not be completed by the Applicant.**

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**Section 2: Must be completed outside of the presence of the Applicant**

The RI PLS Board is required by law to ascertain to obtain evidence of the professional experience and character of all applicants for registration as a RI PLS. Applications will not be reviewed until the Board receives a full application, including five (5) general references, three (3) of which must be from a PLS, registered in at least one US jurisdiction.

1. What is your business or profession?	
2. During what years did you know the applicant?	
3. Are you related to the Applicant? If yes, how?	
4. Describe your association with Applicant.	
5. What is your opinion of the Applicant’s character and professional integrity?	
6. Do you feel the Applicant is qualified to be registered as a Professional Land Surveyor in Rhode Island?	
7. Is there any additional information that you would like to share with the RI PLS Board regarding this applicant?	

**Section 3: Attestation and Signature of PLS Supervisor**

I, \_\_\_\_\_ hereby attest to the truth and veracity of the above statements.

<b>Signature of Reference</b>	
<b>PLS Registration Number and State (if applicable)</b>	

**Insert Your PLS Stamp Impression Here**  
(if applicable)

