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TIMOTHY P. MURRAY LIEUTENANT GOVERNOR

GREGORY BIALECKI SECRETARY OF HOUSING AND ECONOMIC DEVELOPMENT Commonwealth of Massachusetts Division of Professional Licensure Board of Registration of Professional Engineers and Professional Land Surveyors BARBARA ANTHONY UNDERSECRETARY, OFFICE OF CONSUMER AFFAIRS & BUSINESS REGULATION

GEORGE K. WEBER DIRECTOR, DIVISION OF PROFESSIONAL LICENSURE

DUPLICATE WALL CERTIFICATE REQUEST FORM

Candidates seeking a duplicate wall certificate should submit this form along with a certified check, money order or credit card payment in the amount of \$25.00, made payable to Professional Credential Services, to the address shown below (use the attached form).

Mail form and fee to: Professional Credential Services C/O Massachusetts Coordinator PO BOX 198728 Nashville TN 37219

Payment Form

Applicant Name:	
Social Security # (Mandatory):	

Three payment options are available: Company/Corporate/Certified Check, Money Order or Credit Card. If paying by Company/Corporate/Certified Check or Money Order, please make it payable to "PCS" for the total amount of the examination(s) you are applying to take. DO NOT staple your payment to this form. **Fees are non-refundable and non-transferable.**

Please check form of payment below

Certified Check (Please ensure the applicant's name is on the payment)
Money Order (Please ensure the applicant's name is on the payment)
Credit Card
Authorized payment amount: \$ please check one: □ Visa □ MasterCard
Card Number: Exp:/
Cardholder name:
Cardholder billing address:
Print name as it appears on account:
Authorized Signature:

Return this payment form with Application/Scheduling Form

Note: This document will be shredded after it has been processed.