

License Form 1

Application of Professional Engineer License for Issuance Change Replacement Reissue Voluntary Suspension

Items to Be Approved (Have Been Approved)			Items to Be Altered (Not required if no item to be changed)	
Name		Gender		
ID No. <small>(or No. of Alien Resident Certificate)</small>		Date of birth		
Indigenous People Status	<input type="checkbox"/> NO <input type="checkbox"/> YES (The registration by the Census Office should be done if check "YES")		<input type="checkbox"/> NO <input type="checkbox"/> YES (The registration by the Census Office should be done if check "YES")	
No. of Professional Engineer Certificate & Classification	Classification:	No.:	Classification:	No.:
	Classification:	No.:	Classification:	No.:
	Classification:	No.:	Classification:	No.:
	Classification:	No.:	Classification:	No.:
Permanent Address				
Way of Professional Practice	<input type="checkbox"/> Establishing an engineering office organized as a sole proprietorship.		<input type="checkbox"/> Establishing an engineering office organized as a sole proprietorship.	
	<input type="checkbox"/> Establishing an engineering office organized as a partnership.		<input type="checkbox"/> Establishing an engineering office organized as a partnership.	
	<input type="checkbox"/> Establish a professional engineering consulting firm or be hired by one.		<input type="checkbox"/> Establish a professional engineering consulting firm or be hired by one.	
	<input type="checkbox"/> Hired by a profit-seeking enterprise or entity, other than those mentioned in the preceding Subparagraph, which is required by law to hire a licensed professional engineer.		<input type="checkbox"/> Hired by a profit-seeking enterprise or entity, other than those mentioned in the preceding Subparagraph, which is required by law to hire a licensed professional engineer.	
Name of business entity				
Location of business entity				
Telephone	O: _____ (Required) H: _____ (Required) Mobile: _____ E-mail: _____	O: _____ (Required) H: _____ (Required) Mobile: _____ E-mail: _____		
Scope of Professional Practice				
Professional Engineer Association(s) of the corresponding branch. <small>(For Application of Change, Replacement and Reissue, please fill the Professional Engineer Association of Applicant; for Issuance, please fill the Professional Engineer Association would join.)</small>	Name of the Association:		Original license No. <small>(Not required for Issuance)</small>	No.:
Method of Receiving Documents. <small>(Please use check mark "v" to check one of the box; if does not check the method or failed to contact, the Documents will be sent to the Permanent Address)</small>	1. <input type="checkbox"/> Permanent Address.			
	2. <input type="checkbox"/> Mailing Address. : _____ (If the Address is not in print or written legible, the Documents will be sent to the Permanent Address.)			
Pasting the photo on this form. <small>(2"x2" headshot photos within the last 6 months.)</small>	Declarations of the Applicant (Professional Engineer):			Chop of the business entity:
	1. I hereby certify that I am not a current government employee, abide by laws and regulations related to engineering practice, and not under any circumstances of Paragraph 1, Article 11 of the Professional Engineers Act. (Not required for this declaration for the Application of Voluntary Suspension) 2. All contents of this form is true (including further documents required by fax), All copies are certificate true copy of the Original Documents. 3. If I will be in the professional practice in the manner under Subparagraph 1 of Paragraph 1 of Article 7 of the Professional Engineers Act, the Location of business entity shall be used as an office. If the usage is not approved by the local competent authority of construction, I will apply for the usage alteration and assume all related expenses and liabilities. 4. If I apply for Issuance of Professional Engineer License, I actually participated in the works filled in Engineering Experience Evidence Form during the related period 5. If there is any false information contained in the above Declaration, I will bear the legal responsibility.			
Application Date:	Signature of the Applicant (Professional Engineer):			