

**State of Florida
 Department of Business and Professional Regulation
 Board of Professional Geologists
 Maintenance Form/Status Change
 Form # DBPR PG 4704**

APPLICATION CHECKLIST - IMPORTANT - Submit all items on the checklist below with your application to ensure faster processing.

TRANSACTION	APPLICATION REQUIREMENTS
Close Business	<input type="checkbox"/> Complete Sections I, II and VII of this form.
Address Change	<input type="checkbox"/> Complete Sections I, III and VII of this form.
Name Change	<input type="checkbox"/> Complete Sections I, IV and VII of this form. <input type="checkbox"/> Individuals must submit documentation supporting name change. See Section IV of Instructions.
Set License to Inactive (Change of Status)	<input type="checkbox"/> Complete Sections I, V and VII of this form. <input type="checkbox"/> Pay \$100 fee if not within renewal period. (Make check payable to the Department of Business and Professional Regulation)
Set License to Active (Reactivation)	<input type="checkbox"/> Complete Sections I, V and VII of this form. <input type="checkbox"/> Pay \$125 fee if not within renewal period. (Make check payable to the Department of Business and Professional Regulation)
Change Geologist of Record	<input type="checkbox"/> Complete Sections I, VI and VII of this form.

Please mail your completed application, documentation and required fee(s) to:
 Department of Business and Professional Regulation
 2601 Blair Stone Road
 Tallahassee, FL 32399-0783

Instructions

If you have any questions or need assistance in completing this application, please contact the Department of Business and Professional Regulation, Customer Contact Center, at 850.487.1395.

1. Application Instructions (by section)

- a. **Section I – Transaction Type**
 - i. Check only the applicable transaction(s) you are seeking.
- b. **Section II – Close Business**
 - i. This transaction allows a business to cancel their registration with the Department.
 - ii. The section must be completed by the authorized representative. Mail the completed application to the address at the top of the form.
 - iii. There is no fee for this transaction.
- c. **Section III – Address Change**
 - i. This transaction allows a business or individual to change their current mailing and/or physical address.
 - ii. There is no fee for this transaction.
- d. **Section IV – Name Change**
 - i. This transaction allows a business or individual to change their registered name with the Department of Business and Professional Regulation.
 - ii. For a Business Name Change: Prior to applying for a name change with the Department, the name change must be registered with the Florida Department of State, Division of Corporations.

- iii. For an Individual Name Change: A change of name requires submitting supporting legal documentation of name change (e.g. marriage license, court documents showing name change, divorce decree, etc).
 - iv. There is no fee for this transaction.
- e. **Section V – Set License to Inactive/Active**
- i. This transaction allows for an individual to reactivate or set their license to inactive status.
- f. **Section VI – Add/Delete Geologist of Record**
- i. At all time geological services are offered to the public, the business must have on file with the Department a geologist of record.
 - ii. Provide the name, Social Security number and license number of the geologist you wish to add.
 - iii. Provide the name, Social Security number and license number of the geologist you wish to delete.
 - iv. There is no fee for this transaction.
- g. **Section VII – Affirmation by Written Declaration**
- i. The applicant must read and sign the affirmation by written declaration.
 - ii. If this application is for business maintenance, it must be filled out by the owner, officer or director of the firm authorized to execute the application for the business.
 - iii. If the applicant fails to sign the affirmation statement, the Department will not process the application.

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Section I – Transaction Types

CHECK ONLY ONE OF THE APPLICATION TYPES (Multiple transactions can be completed on this form)	
<input type="checkbox"/> Close Business (Complete Sections I, II and VII) [5302/8080]	
<input type="checkbox"/> Address Change (Complete Sections I, III and VII) [5301/5302-9006]	
<input type="checkbox"/> Name Change – (Complete Sections I, IV, and VII) [9006]	
<input type="checkbox"/> Set License to Inactive – (Complete Sections I, V and VII) [4020]	
<input type="checkbox"/> Set License to Active from Inactive – (Complete Sections I, V and VII) [3020]	
<input type="checkbox"/> Change Geologist of Record – (Complete Sections I, VI and VII) [9007]	
APPLICATION TYPE	
<input type="checkbox"/> Individual License Number:	<input type="checkbox"/> Business License Number:
CONTACT INFORMATION	
Name: _____ Phone Number: () -	
Email Address: _____	

Section II – Close Business

BUSINESS INFORMATION
Name of Business: _____

Section III – Address Change

NEW PHYSICAL ADDRESS		
Street Address _____		

City	State	Zip Code
County	Country	
NEW MAILING ADDRESS		
Street Address _____		

City	State	Zip Code
County	Country	



Section IV – Name Change

NAME CHANGE INFORMATION	
If this transaction is for changing the company's name, entities registered with the Department of State/Division of Corporations must change their name there prior to making this request.	
Company/Individual Name (previous)	
Company/Individual Name (new)	

Section V – Set License to Inactive/Active

LICENSEE INFORMATION		
Set License to:	<input type="checkbox"/> Active	<input type="checkbox"/> Inactive

Section VI – Add/Delete Geologist of Record

ADD GEOLOGIST OF RECORD			
Social Security Number*		License Number:	
Last/Surname	First	Middle	Suffix
DELETE GEOLOGIST OF RECORD			
Social Security Number*		License Number:	
Last/Surname	First	Middle	Suffix

* The disclosure of your Social Security number is mandatory on all professional and occupational license applications, is solicited by the authority granted by 42 U.S.C. §§ 653 and 654, and will be used by the Department of Business and Professional Regulation pursuant to §§ 409.2577, 409.2598, 455.203(9), and 559.79(3), Florida Statutes, for the efficient screening of applicants and licensees by a Title IV-D child support agency to assure compliance with child support obligations. It is also required by § 559.79(1), Florida Statutes, for determining eligibility for licensure and mandated by the authority granted by 42 U.S.C. § 405(c)(2)(C)(i), to be used by the Department of Business and Professional Regulation to identify licensees for tax administration purposes.

Section VII – Affirmation By Written Declaration

AFFIRMATION BY WRITTEN DECLARATION	
<p>I certify that I am empowered to execute this application as required by Section 559.79, Florida Statutes. I understand that my signature on this written declaration has the same legal effect as an oath or affirmation. Under penalties of perjury, I declare that I have read the foregoing application and the facts stated in it are true. I understand that falsification of any material information on this application may result in criminal penalty or administrative action, including a fine, suspension or revocation of the license.</p>	
Signature:	Date:
Print Name:	