

Board of Behavioral Health  
301 South Park  
PO Box 200513  
Helena MT 59620-0513  
(406) 444-6880

## RENEWAL APPLICATION

Check For New Address  
and/or e-mail.  
Indicate any changes below.

License No.

Name	<input type="text"/>				
Address	<input type="text"/>				
City	<input type="text"/>	State	<input type="text"/>	Zip	<input type="text"/>
Country	<input type="text"/>				
E-mail	<input type="text"/>				

\$85 – Licensed Addiction Counselor Candidate

**Your Montana Licensed Addiction Counselor Candidate license will expire on June 30.**

**TO RENEW ONLINE, GO TO <https://ebiz.mt.gov/pol/>. If you have questions on how to access an existing account or create a new account contact customer service at 406-841-2300 or [dlibsdfhelp@mt.gov](mailto:dlibsdfhelp@mt.gov). Online renewal transactions must be completed no later than 11:59 PM, MST on the renewal deadline date. Failure to complete the transaction by 11:59 PM, will result in the addition of a late fee.**

**Or, in order to renew your license by mail:**

- 1) Complete the renewal application.
- 2) Answer the disciplinary question at the bottom of the form.
- 3) Submit a check or money order for the amount indicated above, made payable to the Board of Behavioral Health. Do not send cash. Canadian or foreign residents pay in U.S. funds only.
- 4) Renewals with a U.S. Postal Service postmark after June 30 will be assessed a penalty fee by state law of 100% the renewal fee. NO EXCEPTIONS!
- 5) Sign the renewal application. Incomplete or unsigned renewal applications will not be processed and will be returned.
- 6) Return the renewal application and fee to the board office postmarked by June 30.

**HAVE ANY LEGAL OR DISCIPLINARY ACTIONS BEEN INSTITUTED AGAINST YOU OR ANY OF YOUR PROFESSIONAL LICENSES SINCE EITHER YOUR INITIAL LICENSURE IN MONTANA OR SINCE YOU RENEWED YOUR LICENSE, WHICHEVER OCCURRED LATEST?**

**Yes** If so, please attach copies of the document that initiated each action and all final orders. Mont. Code Ann. Sec 37-1-105 requires that you report this information. Failure to accurately furnish the information is grounds for denial or revocation of your license.

**No**

**I hereby declare under penalty of perjury the information included in my renewal to be true and complete to the best of my knowledge.**

Your signature: \_\_\_\_\_ Date: \_\_\_\_\_

DO NOT SEND CASH