

Board of Public Accountants
301 South Park
PO Box 200513
Helena, MT 59620-0513
Renewal Unit
(406) 444-6880

RENEWAL APPLICATION
ACTIVE PERMIT TO PRACTICE

PAC-CPAP-LIC-_____

Check For New Address.
Indicate any changes below.

Renewal Fee: \$150.00

Renewal Fee if postmarked after December 31st: \$ 300.00

Name _____

Address _____

City _____ State _____ Zip Code _____

Country _____

The Board's primary method of communication with licensees is email. Include your preferred email address

Email Address: _____

Check if this is a new email address

Do you perform public accounting services? yes no

If yes, is your firm registered? yes no

Firm Number: PAC-FIRM-LIC-_____

**Your Montana Permit to Practice lapses January 1st. Expiration and termination is provided by
MCA 37-1-141 for failure to renew.**

TO RENEW YOUR LICENSE ONLINE GO TO: eBiz.mt.gov/pol (Online transactions must be completed no later than 11:59 PM, Mountain Time on the renewal deadline date. Failure to complete the transaction by 11:59 PM will result in the addition of a late fee.)

TO RENEW BY MAIL: This form must be **complete** and postmarked by December 31st.

CONTINUING PROFESSIONAL EDUCATION (CPE) STATEMENT

You are required to complete 120 hours of CPE with a subset of 2 hours in Ethics in the three year reporting period ending December 31. Please refer to ARM 24.201.2106 for further CPE information. Permit holders originally licensed less than 3 years are not required to meet the CPE requirement.

- I have completed the required hours of CPE.
- I have NOT completed the required hours of CPE.
- I am not required to complete the full basic requirements of CPE at this time.

YES NO 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? If so, please attach copies of the document that initiated each action and all final orders. MCA 37-1-105 requires that you report this information. Failure to accurately furnish the information is grounds for denial or revocation of your license.

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