Board of Landscape Architects 301 South Park PO Box 200513 Helena MT 59620-0513

(406) 444-6880

RENEWAL APPLICATION

Check For New Address. Indicate any changes below.

Name		
Address		
City	State	Zip Code
Country		

The Board's primary method of communication with licensees is email. Include your preferred email address. E-Mail Address:

Your Montana Landscape Architect license will lapse on **July 1st**.

TO RENEW ONLINE GO TO: https://ebiz.mt.gov/pol (Online transaction 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 an additional late fee.)

OR:

- 1) Complete all the information on the renewal application.
- 2) Answer the disciplinary question at the bottom of the form.
- 3) Submit a check or money order for \$170.00, payable to the Board of Landscape Architects. DO NOT SEND CASH. Canadian and 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% of the unabated renewal fee, increasing the total amount due to \$340.00
- 5) Indicate any address correction or change where requested at the top of the form.
- 6) Sign and date the renewal application and return it to the Board office with the appropriate fee on or before June 30.
- 7) Incomplete or unsigned renewal applications will be returned and may be subject to the penalty fee if not received in the Board office completed and postmarked by June 30.
 - I declare under penalty of perjury that all statements are true. I am aware that a false statement may lead to license discipline.

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

Your signature:	· ·	Date:	
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