

4. AFFIRMATION AND SIGNATURE

I hereby affirm, under penalty of perjury, that all information provided in this application is true and correct to the best of my knowledge. I understand that any false statement by me in this application may result in administrative action against any license or certification issued on the basis of this application. I further acknowledge that I am required to immediately notify PSI, in writing, of any material change in my status as a licensee or qualifying party (including without limitation change of address, change of qualifying party, change of license name or legal entity), and that failure to do so can result in administrative action up to and including revocation of the license or certificate affected by the change.

Applicant Signature: _____

Please provide full name (PRINTED): _____

Date: _____ 20_____

5. NOTARY

Subscribed and sworn before me this _____ day of _____ 20_____

SEAL

Notary Public

My commission expires _____ 20_____

6. PAYMENT Submit Application Packet and Payment to (by walkin or mail):

PSI
2301 Yale Blvd. S.E., Ste C-4
Albuquerque, NM 87106
(877) 663-9267 public.psiexams.com

- If changing entities, please contact PSI for a prorated fee.
- Make all checks or money orders payable to PSI.
- Walk in payments may be made by cash, personal check, company check money order, cashiers check, VISA or MasterCard. (the \$30.00 application fee must be made in a separate payment, two check or two money orders).
- Mail payments may be made by personal check, company check money order, cashiers check, VISA or MasterCard (NO CASH). (the \$30.00 application fee must be made in a separate payment, two check or two money orders).

ALL SUBMISSIONS MUST INCLUDE ORIGINAL DOCUMENTS

*YOU MAY NOT SUBMIT ANY APPLICATIONS BY FAX

((Check one): MC VISA

Full Card No: _____ Expiration Date: _____

Card Verification No: _____

For your security, PSI requires you to enter the card identification number located on your credit card. The card identification number is located on the back of the card and consists of the last three digits on the signature strip.

Cardholder Name (Print): _____ Signature: _____

