

CID JOURNEYMAN CARD/CERTIFICATE REPLACEMENT REQUEST

This form is only for requesting duplicate certificates.

If you need to change an address/contact information, please submit a CID STATUS
CHANGE FORM

Fee: \$6/each

NAME: _____

CERTIFICATE NUMBER: _____

Please print _____ CARDS

This may be submitted by email to newmexicocustomerservice@psionline.com or to

PSI
9550 SAN MATEO BLVD NE, STE F,
ALBUQUERQUE, NM 87113

(Check One): ☐ Mc ☐ Visa ☐ American Express ☐ Discover

Full Card No: _____ Expiration Date: _____

Card Security Code*: _____

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. ***If Amex, Require 4 Digit***

Billing Zip Code: _____

Cardholder Name (Print): _____ Signature: _____