

NEW MEXICO
JOURNEYMAN CERTIFICATE RENEWAL APPLICATION
AN INCOMPLETE, INCORRECT OR OTHERWISE DEFECTIVE APPLICATION WILL NOT BE PROCESSED.

If you have not renewed by the expiration date, your license will be suspended and there will be a \$25 penalty assessed. If your license has not been renewed within 6 months of the expiration date, your certificate will be cancelled. **Incomplete renewal forms that are rejected and returned to you for correction are considered not submitted.**

DATE: _____

Section A. PLEASE PROVIDE THE FOLLOWING INFORMATION. (You must submit a renewal application for each classification.)

CERTIFICATE NUMBER _____ CLASSIFICATION _____ EXP DATE _____

JOURNEYMAN NAME _____

ADDRESS _____
ADDRESS CITY STATE ZIP

PHONE # _____ Email _____

PLEASE NOTE: IF YOU ARE RENEWING AN EE98, EL01J, OR MECHANICAL JOURNEYMAN CERTIFICATE, YOU MUST HAVE COMPLETED 16 HOURS OF APPROVED CONTINUING EDUCATION COURSE WORK (MINIMUM OF 8 HOURS OF CODE UPDATE). FOR A LIST OF APPROVED CONTINUING EDUCATION COURSES, PLEASE VISIT: [HTTP://WWW.RLD.STATE.NM.US/CONSTRUCTION/](http://www.rld.state.nm.us/construction/). IF YOU HAVE A CERTIFICATE FROM YOUR SCHOOL, PLEASE SEND IN A COPY ALONG WITH YOUR RENEWAL APPLICATION.

Section B. ATTESTATION.

Check and sign below to attest to the following:

- I have not bid or performed any unlicensed work in the last 24 months.
- I do not have any outstanding judgments or active complaints against me.
- I do not have any outstanding fees or penalties with CID.
- I am in compliance with the requirements of the Parental Responsibilities Act.

I swear or affirm under penalty of perjury that all statements, attestations and information provided by me above are true and correct, to the best of my knowledge. I understand that any false statement made in this application can result in administrative action against any certificate to which this renewal application applies.

Applicant Printed Name: _____

Signature: _____ Date: _____

****Notary**

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

SEAL

Notary Public

My commission expires _____ 20_____

Section C. PAYMENT Submit Application Packet and Payments to (by walk-in or mail):

**PSI, 2820 Broadbent Pkwy NE, Suite E&F
Albuquerque, NM 87107
(877) 663-9267 public.psiexams.com**

- ✎ Walk-in payments may be made by cash, personal check, company check, money order, cashier's check, VISA, MasterCard or American Express.
- ✎ Mail payments may be made by personal check, company check, money order, cashier's check, VISA, MasterCard or American Express (NO CASH).

**ALL SUBMISSIONS MUST INCLUDE ORIGINAL DOCUMENTS
*YOU MAY NOT SUBMIT ANY APPLICATION BY FAX**

(Check one): MC VISA American Express

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: _____