



FBPE

**FLORIDA BOARD OF
PROFESSIONAL ENGINEERS**

2639 North Monroe Street, Suite B-112
Tallahassee, Florida 32303

**Application to
Change Status from**

ACTIVE TO INACTIVE

	<p>APPLICATION TO CHANGE STATUS FROM ACTIVE TO INACTIVE</p> <p>Fee: \$98.75 (Includes \$5 Unlicensed Activity Fee)</p>	2639 N. Monroe St., Ste. B112 Tallahassee, FL 32303	
NAME	Last: _____	First: _____	Middle: _____
Since you received your PE license have you changed your name through marriage or action of a court? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, attach a copy of the marriage certificate or legal court order.		Other Full Name(s) I am/have been known as: _____	
MAILING ADDRESS	Number and Street: _____		Apt/Lot No.: _____
	City: _____	State: _____	Zip Code: _____ County: _____
HOME TELEPHONE NUMBER:	BUSINESS TELEPHONE NUMBER:	DATE OF BIRTH (MM/DD/YYYY):	
EMAIL ADDRESS: Do you wish to receive correspondence via email? Yes No All correspondence, including renewal notices and the FBPE newsletter, are typically sent by email. All email addresses are public records pursuant to F.S. Chapter 119.011(12).		SOCIAL SECURITY NO.: Social Security Numbers are mandatory pursuant to Title 42 United States Code, Sections 653 and 654; and Sections 455.203(9), 455.213(1), 409.2577, and 409.2598, F.S.	
INACTIVE STATUS REQUEST			
Once placed in inactive status, I understand that I will be required to pay the <u>biennial</u> renewal fee that shall be due on February 28 of the odd year. I also understand that my license will not be returned to active status until I submit an Application to Change Status from Inactive to Active, including submission of all required documents and fees for active status. I further understand that I cannot practice engineering in Florida while my license is in inactive status unless I practice in an exempt field.			
REQUIRED ATTESTATION			
In accordance with Section 471.033, F.S., and with Rule 61G15 – 19.004(2)(c), F.A.C., I attest that I understand that I must report to the Board any action taken against a license that I hold in another jurisdiction other than Florida since my last renewal. If I have had action against such license, I must provide an explanation and a copy of any Consent Order or Final Order to the Board.			
Yes, I have been disciplined <input type="checkbox"/>		No, I have not been disciplined <input type="checkbox"/>	
I am requesting to change the status of my license from Active to Inactive in accordance with <u>Section</u> 455.271, F.S. with the required fee attached to this application.			
Applicant Sign Here  _____			
Date _____		License Number: _____	