



STATE OF TENNESSEE  
 Department of Commerce and Insurance  
 BOARD OF EXAMINERS FOR LAND SURVEYORS  
 500 James Robertson Parkway  
 Nashville, TN 37243-1146  
 615-741-3611  
 Fax: 615-532-9410  
[www.tn.gov/commerce/boards/surveyors](http://www.tn.gov/commerce/boards/surveyors)

**STATE BOARD OF VERIFICATION**

\_\_\_\_\_  
 (State)

The person whose name and address appear below has made application for licensing with the **Tennessee Board of Examiners for Land Surveyors** and states that he/she is licensed to practice Land Surveying in your state.

APPLICANT \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

Please furnish the Tennessee board with the following information regarding the above named applicant.

1.	Written Examination	Hours	Results/Final Grade	NCEES	Date of Exam
	FLS	_____	_____	_____	_____
	PLS	_____	_____	_____	_____
	State/Other	_____	_____	_____	_____

2. \_\_\_\_\_ FLS accepted from \_\_\_\_\_

3. \_\_\_\_\_ PLS accepted from \_\_\_\_\_

Has the above name ever been disciplined by your Board or is disciplinary action pending? \_\_\_\_\_  
 If yes, please explain on reverse side.

Signed by \_\_\_\_\_

Title: \_\_\_\_\_

(BOARD SEAL)

Date: \_\_\_\_\_

If a fee is required, please notify the applicant, but do not delay the processing of this form.

**STATE BOARD RESPONDING** – Please mail this form directly to the Tennessee board office – **DO NOT** return to the applicant.