



State of Alaska  
Department of Commerce, Community, and Economic Development  
Division of Corporations, Business and Professional Licensing  
**Board of Registration for Architects, Engineers and Land Surveyors**  
333 Willoughby Avenue, 9th Floor, State Office Building  
P.O. Box 110806, Juneau, Alaska 99811-0806  
Phone: (907) 465-2540 Fax: (907) 465-2974  
E-mail: [license@alaska.gov](mailto:license@alaska.gov)

## **APPLICANT INSTRUCTIONS FOR ENGINEERS AND LAND SURVEYORS REGISTRATION BY EXAMINATION OR COMITY**

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### **PLEASE READ THE APPLICATION, STATUTES, REGULATIONS, AND THESE INSTRUCTIONS BEFORE COMPLETING YOUR APPLICATION.**

APPLICATIONS WILL BE PROCESSED according to the date received. The board meets four times a year, usually in February, May, August, and November. (Board meeting dates are posted on the Board's website at [www.commerce.alaska.gov/occ/pael.cfm](http://www.commerce.alaska.gov/occ/pael.cfm).) Written notification of action taken by the board will be mailed approximately three weeks after the board meeting. All documents received prior to receipt of application will be held up to one year and matched with an application upon receipt.

THE APPLICATIONS are updated frequently. If you obtained this application other than directly from the Division or its official website the application may be outdated. Please check the website for the latest version. (<http://www.commerce.alaska.gov/occ/pael.cfm>).

A DENIAL OF AN APPLICATION for registration may be reported to any person, professional licensing board, federal, state, or local government agency, other entity making a relevant inquiry, or as may be required by law.

ALASKA REGISTERS INDIVIDUALS BY EXAMINATION OR COMITY for the following professions: Land Surveying and Professional Engineering in only the following disciplines: Civil, Chemical, Electrical, Mechanical, Mining, and Petroleum. Applicants registered in other branches of engineering will be required to pass the NCEES PE Exam in the discipline for which they are applying.

ALASKA DOES NOT HAVE RECIPROCITY (WRITTEN AGREEMENT) WITH ANY OTHER STATE OR COUNTRY. Comity **MAY** be granted to professional registrants from other states, territories, and foreign countries at the discretion of the board and in compliance with statutes and regulations. (12 AAC 36.105 and .107 by authority of AS 08.48)

COMITY IS NOT GRANTED to applicants who have not been registered by fundamental and professional examinations regardless of registration(s) held in another licensing jurisdiction or years of professional work experience. However, the Fundamentals of Engineering Exam may be waived by verified work experience (see 12 AAC 36.090). Comity applicants must submit work verification forms or letters of reference – see 12 AAC 36.105(c) or 12 AAC 36.107(c).

APPLICANTS are required to have all examinations and required work experience verified by a third party using Alaska forms and mailed directly to the Alaska board office. NCEES Council Records may be accepted for verification of education, examinations, and current registration.

### **FEES**

The application fee required is the nonrefundable fee in effect on the date the application is received by the Division. The registration fee is the fee in effect on the date of initial registration. If the registration fee changes after you have applied, the amount due will be recalculated based on the fee in effect at the time of registration.

### **APPLICATION DEADLINE**

The completed application, application fee and all supporting documents must be received by the Division's Juneau office at least 10 days prior to each scheduled meeting of the Board. The completed application must be typed and notarized. The application form is available on the board's website. The board tentatively meets in February, May, August and November. The board meeting dates can be found on the board's website at [www.commerce.alaska.gov/occ/pael.cfm](http://www.commerce.alaska.gov/occ/pael.cfm).

Beginning with the October 2006 examinations the division has contracted with NCEES to administer the exams. Candidates (except AKLS) will pay exam fees directly to NCEES. For more information: [www.ncees.org/examadministration/](http://www.ncees.org/examadministration/)

### **RETKING A FAILED EXAM**

Candidates must submit a written request to the division to retake a failed exam. The division will then notify NCEES of exam eligibility.

### **POSTPONING EXAM**

NCEES does not allow candidates to postpone examinations. NCEES will permit a partial refund of canceled exams but only up to a deadline date established prior to each examination date.

### **COMITY APPLICATION DEADLINE**

All comity applications and supporting documents, i.e., work experience verifications, official transcripts and verification of registration and examination, must be received in the Juneau office no later than 10 days before the date of the next scheduled board meeting. Contact the Division for meeting dates, or check the web site at: <http://www.commerce.alaska.gov/occ/pael.cfm>

### **REFERENCES**

List five references, three of whom must be engineers for engineering registration or land surveyors for land surveying registration, having personal knowledge of your engineering or land surveying education, training, or experience. References may be contacted by the board for additional information. You must provide registration numbers for the references who are engineers or land surveyors (AS 08.48.201(a)(3)).

### **REGISTRATION AND EXAMINATION VERIFICATIONS**

ALL PROFESSIONAL EXAMINATIONS MUST BE VERIFIED BY A REGISTRATION BOARD OR BY NCEES COUNCIL RECORD. Please forward enclosed registration and examination request form(s) to the state in which your original registration was issued or where you took examinations, and to a state board where you hold a current registration. Some boards require a fee for this service and most boards require that you enclose a stamped, preaddressed envelope (use the Alaska board address) along with your verification form(s) and request. IF THE FUNDAMENTALS OF ENGINEERING OR LAND SURVEYING EXAM WAS TAKEN IN ALASKA YOU DO NOT NEED TO COMPLETE OR SEND THE VERIFICATION FORM, BUT YOU MUST LIST THE NAME AND YEAR OF EXAM.

## **SPECIAL EXAM NEEDS**

Programs under the jurisdiction of the Division are administered in accordance with the Americans with Disabilities Act. The special accommodation request will be considered in conjunction with the policies of the National Council of Examiners for Engineers and Surveyors. Examinees must complete the Questionnaire for NCEES Examination Applicants Requesting Test Accommodations (PDF) and **return it to NCEES** by the registration deadline. **You must submit the documentation to NCEES on or before their stated deadline** in order for you to receive accommodations. This form is found on the NCEES web site: [www.ncees.org/examadministration/](http://www.ncees.org/examadministration/)

If you are taking the AKLS you must have a licensed professional complete and submit directly to the board the "Application for Examination Accommodations for Candidates with Disabilities," Form 08-4214, available from the Division web page: <http://www.commerce.alaska.gov/occ/home.htm>

## **EDUCATION**

OFFICIAL TRANSCRIPTS ARE REQUIRED OF EXAM AND COMITY APPLICANTS. If comity applicants have an NCEES council record submitted the board will accept the transcripts from NCEES. Otherwise, official transcripts must be requested by the applicant and sent directly by the college registrar's office to the Alaska board address. Photocopies of transcripts marked "student copies" will not be accepted.

An applicant with a foreign degree must submit a transcript and if the transcript is not in English, submit a translation into English and a signed and notarized affidavit of the accuracy of the translation. An applicant must also submit an evaluation of the education from an agency approved by the board unless the education was earned at a school accredited by an accreditation agency recognized by the board.

## **ARCTIC ENGINEERING REQUIREMENT**

ALL ENGINEER APPLICANTS must successfully complete a board-approved arctic engineering course (listed on web page <http://www.commerce.alaska.gov/occ/pub/baac.pdf>). You may submit your application PRIOR to completion of the course to expedite the application process. If you have already completed the course indicate that information on the application (12 AAC 36.110(a)).

## **STATEMENT OF EXPERIENCE**

List job title, type of work and/or project(s), name and address of employer or supervisor, and list professional, subprofessional, or other experience by the number of months worked in those categories. Indicate number of months in each. Months for responsible charge experience are calculated separately and are included within the total months of professional work experience column. Refer to the definitions in the board's regulations to distinguish between professional, subprofessional, and responsible charge work experience (see 12 AAC 36.990).

WORK EXPERIENCE MUST BE VERIFIED BY EMPLOYERS OR SUPERVISORS USING THE ALASKA WORK EXPERIENCE VERIFICATION FORMS. To expedite the process, you may wish to provide present and previous employers with a stamped envelope with the Alaska board address for their convenience. **Applicants must verify months of professional work experience to total the minimum requirements of combined education and work experience as required by exam and comity regulations.** The board will not give credit for work experience without the third party verification, even if you have listed the experience. Applicants must have their work experience, including responsible charge, verified by a U.S.-registered engineer in the discipline applied for or by a U.S.-registered land surveyor, as appropriate. **The board will not review the application until the work experience verifications are received.**

## **RULES OF PROFESSIONAL CONDUCT**

Please read the statutes and regulations (AS 08.48 and 12 AAC 36.210) and sign the application where indicated, agreeing to exemplify and abide by these rules.

## **AFFIDAVIT**

Sign your application before a Notary Public or other officer authorized to administer oaths. Applications received without a notarized signature will be returned to the applicant.

## **SEALING**

12 AAC 36.185(d). "The registrant shall include the date each time the registrant signs and seals a document by inserting the date within the seal or in a close proximity to the seal." The Board has defined "close proximity" as within two inches of the seal.

## **SOCIAL SECURITY REQUIREMENT**

AS 08.01.060 requires an applicant for a professional license to provide a United States Social Security Number. Applicants who do not have a social security number must complete the "Request for Exception from Social Security Number Requirement" form located at [www.commerce.alaska.gov/occ](http://www.commerce.alaska.gov/occ) or contact the Division for the form.

## **PAYMENT OF CHILD SUPPORT AND STUDENT LOAN**

If the Alaska Child Support Enforcement Division has determined that you are in arrears on child support, or if the Alaska Commission on Post-Secondary Education has determined you are in loan default, you may be issued a nonrenewable temporary license valid for 150 days. Contact Child Support Services at (907) 269-6900 or the Post-Secondary Education office at (907) 465-2962 or 1-800-441-2962 to resolve payment issues.

## **BUSINESS LICENSING**

If you are self-employed or are practicing as a partnership, please contact Business Licensing at (907) 465-2550 or access the Internet for an application. The Internet address is: <http://www.commerce.alaska.gov/occ.htm>. If the business is a corporation, limited liability company, or a limited liability partnership, contact the division for further instructions.

## **CORPORATE, LLC and LLP AUTHORIZATION**

Corporations, LLCs and LLPs offering to perform architectural, engineering, land surveying, or landscape architectural services in Alaska must hold a business license as well as a Certificate of Authorization with the Board of Registration for Architects, Engineers and Land Surveyors. Corporations, LLCs and LLPs may also be required to be registered with the Corporations section of the Division of Corporations, Business and Professional Licensing. For more information, you may contact the Division at (907) 465-2530; P.O. Box 110808, Juneau, Alaska 99811-0808; or access its internet home page at <http://www.commerce.alaska.gov/occ>

## **PUBLIC INFORMATION**

Please be aware that all information on this application will be available to the public unless required to be kept confidential by state or federal law. Current licensee information, including mailing addresses, is available on the Division's website at [www.commerce.alaska.gov/occ](http://www.commerce.alaska.gov/occ) under "Professional License Search."

## **INTERNET INFORMATION**

Certain forms can be printed by accessing the Division's home page at the following address:

<http://www.commerce.alaska.gov/occ/pael.cfm> or by following the links from the Alaska state home page at <http://www.alaska.gov>



**PERSONAL AND PROFESSIONAL REFERENCE LIST – (AS 08.48.201(a)(3)).** All sections must be completed even if submitting NCEES Record

Name	Address	Daytime Telephone	Occupation	Registration No.	State
1.					
2.					
3.					
4.					
5.					

**EXAMINATION AND REGISTRATION**

**EXAMINATIONS**

ENGINEERS: FE: State \_\_\_\_\_ Year \_\_\_\_\_  
 PE: State \_\_\_\_\_ Year \_\_\_\_\_ Discipline \_\_\_\_\_

LAND SURVEYORS: FS: State \_\_\_\_\_ Year \_\_\_\_\_  
 PS: State \_\_\_\_\_ Year \_\_\_\_\_

**PROFESSIONAL REGISTRATIONS:** List all states where you hold or have held registration(s). Use a separate sheet if necessary. Verification of current registration is needed from at least one state as well as verification from the state(s) where examination(s) was/were administered. A form is provided in this application packet. Copy as necessary and send to the appropriate state(s) for completion.

Type of Registration	Registration Number	State	Year Registered	Hours Written Examination	Registered by Comity or Exam	Active or Lapsed
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

**TECHNICAL EDUCATION**

(Official transcripts are required and must be sent directly to the board office from the university, unless verified through NCEES Council Records.)

Name and Address of Institution	Years Attended		Date of Graduation	Degree Received
	From	To		

**3. STATEMENT OF PROFESSIONAL EXPERIENCE**

List in date order with most recent experience first – (attach supplemental sheets if necessary)

Date: From: \_\_\_\_\_ To: \_\_\_\_\_ Title of Position: \_\_\_\_\_

Character of each engagement (be specific): \_\_\_\_\_

Name of employer or person most familiar with engagement: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

**Time in Months (Professional + Subprofessional = Total Months)**

Responsible Control\*: \_\_\_\_\_ Professional\*: \_\_\_\_\_ Subprofessional\*: \_\_\_\_\_ Total Months: \_\_\_\_\_

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Date: From: \_\_\_\_\_ To: \_\_\_\_\_ Title of Position: \_\_\_\_\_

Character of each engagement (be specific): \_\_\_\_\_

Name of employer or person most familiar with engagement: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

**Time in Months (Professional + Subprofessional = Total Months)**

Responsible Control\*: \_\_\_\_\_ Professional\*: \_\_\_\_\_ Subprofessional\*: \_\_\_\_\_ Total Months: \_\_\_\_\_

-----  
Date: From: \_\_\_\_\_ To: \_\_\_\_\_ Title of Position: \_\_\_\_\_

Character of each engagement (be specific): \_\_\_\_\_

Name of employer or person most familiar with engagement: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

**Time in Months (Professional + Subprofessional = Total Months)**

Responsible Control\*: \_\_\_\_\_ Professional\*: \_\_\_\_\_ Subprofessional\*: \_\_\_\_\_ Total Months: \_\_\_\_\_

-----  
Date: From: \_\_\_\_\_ To: \_\_\_\_\_ Title of Position: \_\_\_\_\_

Character of each engagement (be specific): \_\_\_\_\_

Name of employer or person most familiar with engagement: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

**Time in Months (Professional + Subprofessional = Total Months)**

Responsible Control\*: \_\_\_\_\_ Professional\*: \_\_\_\_\_ Subprofessional\*: \_\_\_\_\_ Total Months: \_\_\_\_\_

**DEFINITION OF RESPONSIBLE CHARGE**

(12 AC 36.990(19)(20))

(1) "Responsible Charge of work in the Field" means the direction of work, the successful accomplishment of which rested upon the applicant, where the applicant has to decide questions of methods of execution and suitability of materials without relying upon advice or instructions from his superiors and where the applicant has to supply solutions to deficiencies in plans or has to correct errors in designs without first referring them to higher authority for approval, except where the approval is a matter of form.

(2) "Responsible Charge" as it pertains to "work in the office" means undertaking investigations or carrying out assignments which demand resourcefulness and originality, or making plans, writing specifications, and directing drafting and computations for the sign of architectural, engineering, or land surveying work with only rough sketches, general information, and field measurements for reference.

**\* Responsible charge experience is counted within the total experience time accumulated.**

COMITY APPLICANTS MUST SUBMIT WORK VERIFICATION FORMS OR LETTERS OF REFERENCE AS REQUIRED BY 12 AAC 36.105(c) OR 12 AAC 36.107(c). EXAM APPLICANTS MUST SUBMIT WORK VERIFICATION FORMS AS REQUIRED BY 12 AAC 36.063 OR 12 AAC 36.065.



**VERIFICATION OF REGISTRATION AND EXAMINATION**

**APPLICANT: REGISTRATION BOARDS REQUIRE THAT YOU INCLUDE A STAMPED, ADDRESSED ENVELOPE WITH THIS VERIFICATION, WHICH MUST BE COMPLETED BY THE STATE ISSUING THE ORIGINAL REGISTRATION AND RETURNED DIRECTLY TO THE ALASKA BOARD AT THE ADDRESS GIVEN ABOVE. TOP PORTION TO BE FILLED IN BY THE APPLICANT:**

BOARD SUBMITTING THIS VERIFICATION: \_\_\_\_\_ APPLICANT NAME: \_\_\_\_\_  
 \_\_\_\_\_ ADDRESS: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 \_\_\_\_\_ SS#: \_\_\_\_\_ DOB: \_\_\_\_\_  
 \_\_\_\_\_ PHONE: \_\_\_\_\_

**THIS PORTION TO BE FILLED IN BY THE VERIFYING BOARD:**

**I. THE ABOVE-NAMED PERSON WAS/IS REGISTERED AS:**

	REGISTRATION NUMBER	DATE ISSUED	VALID UNTIL
<input type="checkbox"/> PROFESSIONAL ENGINEER IN _____ <span style="margin-left: 150px;">(list discipline)</span>	_____	_____	_____
<input type="checkbox"/> PROFESSIONAL LAND SURVEYOR	_____	_____	_____

**II. EXAM VERIFICATION**

THE ABOVE-NAMED PERSON PASSED THE FOLLOWING EXAMINATION(S):

	HOURS	RESULTS	NCEES: YES/NO	EXAM DATE
1. <input type="checkbox"/> WRITTEN EXAMINATION:				
FE	_____	_____	_____	_____
PE	_____	_____	_____	_____
FS	_____	_____	_____	_____
PS	_____	_____	_____	_____
OTHER	_____	_____	_____	_____
OTHER (use back if needed): _____	_____	_____	_____	_____

2.  ORAL EXAMINATION: PE: \_\_\_\_\_ hrs. PS: \_\_\_\_\_ hrs.

3.  FE/FS ACCEPTED FROM: \_\_\_\_\_  
 PE/PS ACCEPTED FROM: \_\_\_\_\_

4.  OTHER: \_\_\_\_\_

**III. HAS ANY DISCIPLINARY ACTION BEEN TAKEN ON THIS REGISTRATION?**  NO  YES  
 (If "yes" please explain on reverse side)

**IV. REMARKS:** \_\_\_\_\_

BY: \_\_\_\_\_ (BOARD SEAL)  
 TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_

## ENGINEERING WORK EXPERIENCE VERIFICATION

### I. THIS PORTION TO BE COMPLETED BY THE APPLICANT:

I, \_\_\_\_\_, am applying to the State of Alaska for:

Professional Engineer (comity)

Professional Engineering Exam

My application shows that I was under your supervision and/or employ from \_\_\_\_\_ to \_\_\_\_\_ = \_\_\_\_\_(months)

Subtract gaps of two continuous months or more: \_\_\_\_\_ (\_\_\_\_\_)

**Total Months of Work Experience:** \_\_\_\_\_

**NOTE TO VERIFIERS OF WORK EXPERIENCE:** Any gaps of employment for any reason during the time frame above in excess of two continuous months must be subtracted from the "months" above.

**NOTE TO COMITY APPLICANTS: IF YOU HAVE AT LEAST FIVE YEARS OF POST-REGISTRATION EXPERIENCE, in lieu of work experience verifications,** you may provide two current letters of reference from registered engineers in the same discipline for which you are applying to verify that experience. The letters should address:

- your professional experience on projects;
- your ability and character;
- their professional association to you;
- how long they have been an associate of yours (minimum of 5 years);
- their specific branch of engineering practice; and
- their registered discipline (if any).

**NOTE: Work experience forms and letters of reference should bear the PE stamp (seal) of the verifier and the stamp (seal) should be signed and dated. The work experience forms and letters must be submitted directly from the signer to the Juneau office at the address or fax number given above.**

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**Definitions:** "Sub-professional work" means time spent working as rod-man, chainman, recorder, draftsman, clerk of works, instrumentation, inspector, or similar work where personal responsibility and technical knowledge are slight.

"Professional work" means the time the applicant has been occupied in engineering or Land Surveying work of higher grade and responsibility than that of sub-professional work.

"Responsible Charge" may be gained either in the field or in the office. Responsible charge means:

- (1) In the field, the applicant must have had the direction of work, the successful accomplishment of which rested upon the applicant, where the applicant had to decide questions of methods of execution and suitability of materials without relying upon advice or instructions from his/her superiors and where the applicant had to supply solutions to deficiencies in plans or had to correct errors in design without first referring them to higher authority for approval, except where the approval is a matter of form.
- (2) In the office, the applicant must have had to undertake investigations or carry out assignments which demand resourcefulness and originality, or make plans, write specifications, and direct drafting and computations for the design of architectural, engineering, or land surveying work with only rough sketches, general information and field measurements for reference.

**II. EMPLOYER OR SUPERVISOR:** COMPLETE THIS FORM AND SEND DIRECTLY TO THE ALASKA STATE BOARD OF REGISTRATION FOR ARCHITECTS, ENGINEERS AND LAND SURVEYORS. THIS IS IMPORTANT TO THE APPLICANT AS HIS/HER EXPERIENCE CANNOT BE ACCEPTED UNLESS VERIFIED.

\_\_\_\_\_ was/was not employed by \_\_\_\_\_

as a \_\_\_\_\_.

**Describe the work the applicant performed and his/her responsibilities.** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

A REMINDER: IF YOU ARE NOT A PROFESSIONAL ENGINEER, YOU MAY NOT VERIFY ANY "RESPONSIBLE CHARGE" EXPERIENCE. PLEASE CONTINUE.

**ENGINEERING PROFESSIONAL WORK EXPERIENCE VERIFICATION**

In your opinion, has the applicant had **professional** experience on any projects? Please name one: \_\_\_\_\_

\_\_\_\_\_

1. During the period of employment stated above, how many months were considered "sub-professional work?"  
(See definition above) = \_\_\_\_\_
2. During the period of employment stated above, how many months were considered "professional work?"  
(See definition above) = \_\_\_\_\_
3. Of the time considered "professional work," how many months was the applicant in a position of "responsible charge?"  
(See definition above) = \_\_\_\_\_

**The total months for sub-professional and professional experience should equal the total months during the period of employment** stated in Section I on the previous page. Responsible charge experience is a subset of professional experience and should be less than or equal to the number of months entered for question number 2.

What professional association did you have with the applicant? \_\_\_\_\_

\_\_\_\_\_

Would you employ this applicant in a position of trust?  Yes  No

Do you recommend the applicant for the registration requested?  Yes  No

Professional Seal

Signature

Date

**NOTE: If no seal or stamp is available, please state reason.**

(Print or Type Name)

Address

Telephone

Registration No.

State

Were you registered at the time you supervised the applicant?  Yes  No

Were you registered in a discipline specific state?  Yes  No

If "yes", what discipline were you registered in? \_\_\_\_\_

**No, I am not a professional engineer.**

STATE OF ALASKA  
 DEPARTMENT OF COMMERCE, COMMUNITY, AND ECONOMIC DEVELOPMENT (DCCED)  
 DIVISION OF CORPORATIONS, BUSINESS AND PROFESSIONAL LICENSING  
 BOARD OF REGISTRATION FOR ARCHITECTS, ENGINEERS AND LAND SURVEYORS (AELS)  
 P.O. BOX 110806  
 JUNEAU, ALASKA 99811-0806  
 Phone: (907) 465-2540 Fax: (907) 465-2974  
 E-mail: license@alaska.gov

**LAND SURVEYOR WORK VERIFICATION**

SOCIAL SECURITY NO. (Optional): \_\_\_\_\_

NAME: \_\_\_\_\_ (Applicant)      COMPANY: \_\_\_\_\_ (Employer)

(NOTE: If you have a work verification file open with the board identify your Applicant File Number \_\_\_\_\_. If you need information regarding opening a file contact the division at the above address.)

SUPERVISOR: \_\_\_\_\_ DATES OF EXPERIENCE: \_\_\_\_\_ (Calendar Dates)

**WORK EXPERIENCE (in Months)**  
**(To be completed by applicant)**

FIELD	Date(s) From/To	OFFICE	Date(s) From/To
Control or Geodetic Surveys		Boundary Computations	
Topographic Surveys		Field Note Reduction	
Staking Property Boundaries (Location & Monumentation)		Subdivision Design & Property Description Preparation	
Construction Layout (including Building Trades experience)		Survey Project Administration (as Project Manager)	
Professional Judgment Decisions Regarding Placement of Lines or Corners		Plat & Deed Research (Title Research)	
Other (Explain Below):		Other (Explain Below):	

**EXPLANATION of "Other" Field or Office Experience (Use a separate page if necessary)**

Supervision of Field Party:  Yes     No      Supervision of Office Personnel:  Yes     No

Estimated Percentage of Time Supervising:    Field Party: \_\_\_\_\_    Office: \_\_\_\_\_

**APPLICANT**

**NOTE:** No more than 12 months education or experience may be counted in any 12-month period. If you went to school full-time for a school year, you may count that time as a full year for education, but no summer experience may be counted toward "work experience" (12 AAC 36.064 (b) and 12 AAC 36.065(f)).

**Original work verifications must be submitted directly to the Alaska Board of Registration for Architects, Engineers and Land Surveyors (AELS) by the Supervisor or Professional Registrant certifying the work experience.**

**LAND SURVEYOR WORK VERIFICATION**

**Applicant Name:** \_\_\_\_\_

Please refer to the statutes and regulations referenced.

**DEFINITIONS:**

AS 08.48.341(13) "**practice of land surveying**" means the teaching of land surveying courses at an institution of higher learning, or any service or work the adequate performance of which involves the application of special knowledge of the principles of mathematics, the related physical and applied related sciences, and the relevant requirements of law for adequate evidence of the act of measuring and locating land, geodetic and cadastral surveys for the location and monumentation of property boundaries, for the platting and planning of land and subdivisions of land, including the topography, alignment and grades for streets, and for the preparation and perpetuation of maps, record plats, field note records and property descriptions that represent these surveys;

12 AAC 36.065(b) "**Responsible charge of professional land surveying (P.L.S.)**" means work as a supervisor under the responsible control of a land surveyor registered in the United States, and working in the "practice of land surveying" as described in AS 08.48.341(13). The remainder of the required work experience listed in (a) of this section must be derived from office or fieldwork involving the activities listed in AS 08.48.341(13). Partial completion of a curriculum leading to a degree in land surveying will be considered by the board in determining applicable work experience. The board will determine the amount of credit given for responsible charge experience gained under the responsible control of a professional in engineering based on applicability to professional land surveying.

"**Subprofessional work**" means time spent working as rodman, chainman, recorder, draftsman, clerk of works, instrumentation, inspector, or similar work where personal responsibility and technical knowledge are slight. (12 AAC 36.990(22))

"**Professional work**" means the time the applicant has been occupied in engineering or Land Surveying work of higher grade and responsibility than that of subprofessional work. (12 AAC 36.990(18))

**SUPERVISOR:**

**NOTE:** Was applicant continuously employed during calendar dates listed on first page?  Yes  No  
 If not, give number of months of actual employment on this report: \_\_\_\_\_

**SUMMARY (in Months)**  
**(To be completed by Supervisor or Professional Registrant)**

	<b>Months</b>		<b>Months</b>
Field Work Eligible as "Responsible Charge"		Office Work Eligible as "Responsible Charge"	
Field Work Not Eligible as "Responsible Charge"		Office Work Not Eligible as "Responsible Charge"	

TOTAL MONTHS OF SURVEYING EXPERIENCE (On This Page): \_\_\_\_\_

TOTAL MONTHS RESPONSIBLE CHARGE (On This Page): \_\_\_\_\_

TOTAL MONTHS PROFESSIONAL WORK EXPERIENCE (on this page): \_\_\_\_\_

TOTAL MONTHS SUBPROFESSIONAL WORK EXPERIENCE (on this page): \_\_\_\_\_

**The total months for subprofessional experience should equal the total months during the period of employment.**  
 Responsible charge experience is a subset of professional experience.

**If responsible charge experience is credited to the applicant** give a brief description of a typical project for which the applicant demonstrated professional judgment and responsible charge experience, and the character of the duties required by the project:

**Typical Project Description:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PROFESSIONAL REGISTRANT CERTIFICATION**

Name: \_\_\_\_\_

Place Professional Seal Here

Signature: \_\_\_\_\_

(If no seal or stamp is available,  
please state reason.)

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Date: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

Registration No.: \_\_\_\_\_ State: \_\_\_\_\_

Were you registered at the time of supervision?  Yes  No

**NOTE: This document must be submitted directly to the Division by the Supervisor.**

# APPLICANT CHECKLIST

## Registration by Comity Engineers

State of Alaska Board of Registration for Architects, Engineers and Land Surveyors

P.O. Box 110806

Juneau, Alaska 99811-0806

Phone: (907) 465-2540 Fax: (907) 465-2974

E-mail: license@alaska.gov

### I. ENGINEER BY COMITY

**Please use this checklist to assure that you have completed or requested all required documentation.**

1. Completed TYPEWRITTEN AND NOTARIZED application. NO FACSIMILES ACCEPTED.
2. Fees: \$275 (\$50 nonrefundable application fee, \$100 board review fee, \$125 biennial registration fee.) Make check payable to "State of Alaska."
3. Verification of NCEES PE examination and current registration in at least one other state must be submitted directly from the state board(s) to our office.
4. Official transcripts must be submitted directly from the school to our office;

**OR**

**Submit NCEES Council Record in place of #3 and #4.**

5. Work Experience Verification (Form 08-4085c), included in the application packet, must be submitted to the Division directly from your supervisor(s) and must document 24 months of responsible charge experience under the supervision of an engineer who is registered in the U.S. in the same discipline for which you are applying.

**OR**

6. **If you have at least five years post registration experience**, in lieu of #5, you may provide two current letters of reference from engineers in the same discipline for which you are applying. The letters should address:

- your professional experience on projects;
- your ability and character;
- their professional association to you; and
- how long they have been an associate of yours.

**Note: Work experience forms and letters of reference (#5 and #6) must be submitted directly from the signer to the Juneau office at the address or fax number given above.**

**OR**

**Submit NCEES Council Record in place of #3 and #4. Documents required in #5 and #6 must be submitted by the signer of said documents even though a NCEES Council Record is being submitted. Even when submitting a Council Record you must complete the entire application. Do not write "See Council Record."**

7. Arctic Requirement (12 AAC 36.110). (NOTE: Your application may go to the board for review before completion of the arctic requirement, but this requirement must be satisfied prior to registration.)

# APPLICANT CHECKLIST

## Registration by Comity

### Land Surveyors

State of Alaska Board of Registration for Architects, Engineers and Land Surveyors

P.O. Box 110806

Juneau, Alaska 99811-0806

Phone: (907) 465-2540

Fax: (907) 465-2974

E-mail: [license@alaska.gov](mailto:license@alaska.gov)

## II. LAND SURVEYOR BY COMITY

**Please use this checklist to assure that you have completed or requested all required documentation.**

1. Completed TYPEWRITTEN AND NOTARIZED application. NO FACSIMILES ACCEPTED.
2. Fees: \$375 (\$50 nonrefundable application fee, \$100 review fee, \$100 AKLS exam fee, \$125 biennial registration fee.)
3. Mailed Verification of Registration and Examination form(s) (Form 08-4085b), included with this application, to states in which you are currently registered, or in which you took exams, along with any necessary fees.
4. Requested official transcripts to be sent directly from school to Alaska Board at the Juneau office address above.
5. Mailed Alaska Work Experience Verification (Form 08-4085d, included with this packet) to supervisors and employers to document at least 36 months of responsible charge experience under the supervision of a U.S. registered land surveyor. You **MUST** have your work experience documented on this form.

### OR

6. If you are currently registered and have at least **five years post registration professional land surveying experience**, in lieu of #5, you may provide two current letters of reference from U.S. registered land surveyors. The letter should address:
  - your professional experience on projects;
  - your ability and character;
  - their professional association to you; and
  - how long they have been an associate of yours.

**NOTE: Work experience forms and letters of reference (#5 and #6) must be submitted directly from the signer to the Juneau office at the address or fax number given above.**

7. AKLS requirement (12 AAC 36.100(d)(3)). You must pass the Alaska Land Surveying (AKLS) examination prior to registration. Your application must be reviewed by the board for approval to sit for the exam. If your application is approved, upon passing the AKLS exam your registration will be issued.



State of Alaska  
 Department of Commerce, Community, and Economic Development  
 Division of Corporations, Business and Professional Licensing  
 PO Box 110806, Juneau, Alaska 99811-0806  
 Phone: (907) 465-2550  
 Fax: (907) 465-2974

OFFICE USE ONLY

**CREDIT CARD PAYMENT**

For security purposes, please **do not email** credit card information. Fax or mail this form to the Division. Completion of this form is not proof of payment until the division processes the information contained herein. If any information on this form is illegible, the form will be rejected. Please print.

Name of Applicant or Licensee: \_\_\_\_\_  
*Corporate or Individual (first, middle, last)*

License Number (if applicable): \_\_\_\_\_

Type of License: \_\_\_\_\_

I wish to make payment by credit card for the following (check all that apply):

- |   |                     |
|---|---------------------|
| <input type="checkbox"/> Application fee          | Amount              |
| <input type="checkbox"/> License (or renewal) fee | _____               |
| <input type="checkbox"/> Fine                     | _____               |
| <input type="checkbox"/> Other (specify): _____   | _____               |
|   | <b>Total:</b> _____ |

Print Name on Credit Card: \_\_\_\_\_

Complete Mailing Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address (optional): \_\_\_\_\_

Credit Card Type (check one):  VISA  MASTERCARD

**Signature of Credit Card Holder:** \_\_\_\_\_

**Card Number:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

*The bottom section of this form will be destroyed upon processing of the payment.*