



Application for Certificate of Commercial Practice (CoCP)

Fee: \$100.00

Check or Stripe Receipt Number: _____

Name of Company: _____

DBA (If Applicable): _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Telephone Number: _____

Do you wish to receive email notifications in lieu of mailing in regards to your CoCP license? Yes No

Organized and incorporated under the laws of the state of: _____

List all officers and Directors attach additional sheets if necessary

Name	Address
Name	Address
Name	Address

List all employees currently licensed as a Professional Engineer or Professional Land Surveyor in North Dakota

If your company is applying to offer both engineering and land surveying services in North Dakota, you must list at least one Professional Engineer and one Professional Land Surveyor to qualify for our full practice certificate. Please attach additional sheets if necessary.

Name	License Number	Name	License Number
Name	License Number	Name	License Number
Name	License Number	Name	License Number

By Checking this box, I attest that I am authorized by the company listed above to prepare this application for a Certificate of Commercial Practice (CoCP), and attest to the best of my knowledge and belief, that the information contained herein is true and correct in every respect.

Signature

Printed Name (First, MI, Last)

Date