



## Application for Duplicate Licence or Certificate

This Application form must be filled in completely and returned to this department with payment of the fee of \$82.00. Failure to do so may result in a delay in the processing of your application. Please refer to LIB-0003 Client Authorization Payment form for payment options. You can download all forms at [www.cpsp.gov.sk.ca](http://www.cpsp.gov.sk.ca). **LIB-0012**

### I. Personal Information

**Name:** \_\_\_\_\_  
(Surname) (First Name) (Middle Initial)

**Address:** \_\_\_\_\_  
(Apt/Street) (City, Prov) (Postal Code)

**Home Phone:** ( ) \_\_\_\_\_ **Work Phone:** ( ) \_\_\_\_\_ **Fax:** ( ) \_\_\_\_\_

**Email Address:** \_\_\_\_\_

To the best of my knowledge, this application and all supporting documents are accurate. I understand that a false or misleading statement in this application or in any of the reference or other evidence of qualification submitted by myself or on my behalf may result in the chief inspector denying this application.

\_\_\_\_\_  
(Signature of Applicant) (Date - YYYY MM DD)

### II. Licence or Certificate Information

<i>Press. Equipment Inspector's</i>	<i>Certificate</i>	<i>Licence</i>	<i>Class:</i> _____
<i>Welding Examiner's</i>	<i>Certificate</i>	<i>Licence</i>	<i>Class:</i> _____
<i>Power Engineer's</i>	<i>Certificate</i>	<i>Licence</i>	<i>Class:</i> _____
<i>Welder's Licence</i>	<i>Specify:</i> _____		

To be eligible for a duplicate licence the current one must be in good standing.

### III. Office Use Only

**Duplicate Licence or Certificate:** \_\_\_\_\_ (Revenue Code 510-432900)

**Duplicate Issued?** Yes No **If no, state reason:** \_\_\_\_\_

**Issued by:** \_\_\_\_\_ (Date - MM DD YYYY)

**Note:** For any licence or certificate not listed in Section II above please contact the Ministry for the specific requirements.