

REQUIREMENTS FOR LICENSURE - SURVEYOR

Access this form via website at: www.hawaii.gov/dcca/areas/pvl

REQUIREMENTS

1. Possess the proper education and/or experience as contained below; AND
2. Pass the NCEES, FS and PS exams or equivalent exams or document 15 years of experience in responsible charge; AND
3. Pass the Board-produced exam on Hawaii Description Writing.

PATHWAYS

There are two basic pathways to licensure:

1. If you are already licensed in another state, you will be seeking licensure via
 - a. Endorsement with NCEES exams or
 - b. Endorsement without NCEES exams.
2. If you are NOT licensed in any other state, you will be seeking licensure via NCEES exams.

On page 1 of the application form, please indicate which pathway (1a, 1b, or 2) for licensure you are taking.

MINIMUM EDUCATION & EXPERIENCE

The amount of experience required is dependent on the level of education you have and the pathway applicable to you:

EDUCATION LEVEL	LAWFUL EXPERIENCE	EXAMINATIONS	
1 – Graduate of a 4-year geoscience, land surveying, civil engineering, or general engineering curriculum from an approved school or college	3 years	FS and PS or 15 years responsible charge	* Board Exam
2 – Graduate of a 4-year arts and science curriculum with a math, science, or science-related major from an approved school or college	7 years	FS and PS or 15 years responsible charge	* Board Exam
3 – Graduate of a 2-year civil engineering technology (survey optional) curriculum from an approved school or college	7 years	FS and PS or 15 years responsible charge	* Board Exam
4 – No degree	11 years	FS and PS or 15 years responsible charge	* Board Exam

On page 1 of the application form, please indicate which level of education (1 to 4) you have.

* Option of 15 years Responsible Charge experience only applicable to Licensure via Endorsement.

FOREIGN EDUCATION

In addition to the foregoing, graduates of foreign colleges must have their foreign education evaluated if they wish to have their college degree(s) considered.

In order to do this, contact The Center for Professional Engineering Education Services ("CPEES"), which is affiliated with the National Council of Examiners for Engineering and Surveying ("NCEES") by going to their website at www.cpees.org, or by calling 1-800-464-7650, or writing to P.O. Box 720010, Miami, FL 33172; FAX (305) 348-5049.

Reports are prepared by CPEES and a copy is usually sent to us within 45 days following receipt of all required documents.

VERIFICATION OF EDUCATION AND EXPERIENCE

Applicants are required to document his/her education and experience. You will need to document your experience in the record portion of the application. However, your level of education and pathway for licensure will dictate the type of additional verification you will need to submit. Refer to the listing below for ways to provide evidence of your experience:

1. NCEES Council Record.
2. Supervised experience: You must have the enclosed forms EAS-14, "Verification of Supervision", completed by your supervisor(s). If your supervisor is no longer available, contact your original state of licensure and have them submit copies of documentation on your experience directly to the Board.
Note: If you need to take the NCEES exams, the experience must have been gained by the filing deadline (January 10 or July 10).
3. Experience in responsible charge (for licensure via endorsement): You must have the enclosed form EAS-11(a) completed. Please note that experience in responsible charge will be credited in the ratio of 2:1 of the required lawful experience.
4. Combination of #2 and #3 above.

EXAMINATION

Applicants for licensure via endorsement:

Verification of your examination and exam scores must be accomplished. Send the "Verification of Exam/License", form S-1, to the state in which you were **ORIGINALLY LICENSED BY EXAMINATION** with the appropriate service fee, if any. Contact your state licensing agency for any charge. If more than one form is needed, in cases where the exams were taken in more than one state, please duplicate. Completion of this form will also serve to verify your out-of-state license.

If you wish to have the NCEES exams waived, you will need to complete the "Verification of Experience in Responsible Charge".

Applicants for licensure via NCEES exam:

Upon approval of your application, you will be mailed an approval notice. You must then register and pay exam fees **DIRECTLY** with NCEES to take the next scheduled exam by NCEES's filing deadline. To register for the exam, go to www.els-examreg.org OR call NCEES at 1-877-536-7729, Monday-Friday between 7:30 am – 5:00 pm Eastern Standard Time.

We will then inform the test administrator, the National Council of Examiners for Engineers and Surveyors, of your eligibility to take the FS and/or PS. The NCEES will send you an examination packet containing information on registration and cancellation deadlines and fees.

1. NCEES exams
 - a. Fundamental of Surveying (FS)*
 - b. Principles and Practice of Surveying (PS)

The FS and PS exams are offered twice a year (April and October) on Oahu.
Application filing deadline: January 10th for April; July 10th for October.

For your information:

NCEES
P.O. Box 1686
Clemson, SC 29633-1686
Phone: (864) 654-6824
www.ncees.org

*Education level and experience to qualify to take the NCEES FS exam:

EDUCATION LEVEL	EXPERIENCE
1 – Be in the last year of a geoscience, land surveying, civil engineering, or general engineering curriculum from an approved school or college with graduation within 7 months of the date of application	None
2 – Graduate of a 4-year geoscience, land surveying, civil engineering, or general engineering curriculum from an approved school or college	None
3 – Graduate of a 4-year arts and science curriculum with a math, science, or science-related major from an approved school or college	5 years
4 – Graduate of a 2-year civil engineering technology (survey optional) curriculum from an approved school or college	5 years
5 – No degree	9 years

On page 1 of the application form, please indicate which level of education (1 to 5) you have.

The Board-produced Hawaii Description Writing Exam:

The board-produced exam is offered twice a year (April and October) **on Oahu.**

Application filing deadline: January 10th for April; July 10th for October.

Cost: \$80 made payable to Commerce & Consumer Affairs.

If you are require special accommodations to sit for the licensure examination, please contact the Exam Branch immediately, but no later than the exam filing deadline, at (808) 586-2711 to obtain a Disability Certification Form that will need to be completed and returned to our office. No action will be taken to provide special testing accommodations until your exam application is complete and approved.

SUBMITTALS

1. Complete the entire application; provide details of your experience in the "Experience Record" portion (keep in mind that "supervisor" refers to a licensed surveyor other than yourself); and
2. Provide a copy of all pertinent diplomas or official transcript(s) from an approved school or college; and
3. A non-refundable application fee of \$75 made payable to Commerce & Consumer Affairs; and
4. If applicable, the \$80 exam fee for the Hawaii Description Writing Exam.

Depending on your pathway and the examination you are applying for, the board will be awaiting submission of one or more of the following:

1. "Verification of Supervision" form completed by your supervisor(s) who is a licensed surveyor;
 2. "Verification of Exam/License" form from another state board;
 3. "Experience in Responsible Charge" form from a licensed surveyor; or
 4. CPEES report if you are a graduate of a foreign college.
- or
5. NCEES Council Record.

This material can be made available for individuals with special needs. Please call the Licensing Branch Manager at (808) 586-3000 to submit your request.

INFORMATION & INSTRUCTIONS – SURVEYOR

Complete the attached form using a typewriter or print legibly in black ink. Answer all questions and sign and date the application form. Applications that lack supporting documents required for exam or licensure will not be considered. It is the applicant's responsibility to ensure that all documents are timely received.

REQUIREMENTS

Please read the requirements section carefully. Should you have a question or concern regarding the requirements, contact the Licensing Branch at (808) 586-3000.

Individuals from the neighbor islands can call the toll free access numbers:

Kauai:	274-3141 ext. 3000	Maui:	984-2400 ext. 3000
Hawaii:	974-4000 ext. 3000	Molokai:	1-800-468-4644 ext. 3000
Lanai:	1-800-468-4644 ext. 3000		

Information can also be obtained from the Professional & Vocational Licensing Division website: www.hawaii.gov/dcca/areas/pvl

SOCIAL SECURITY NUMBER

Your social security number is used to verify your identity for licensing purposes and for compliance with the below laws. For a license to be issued you must **provide your social security number or your application will be deemed deficient and will not be processed further.**

The following laws require that you furnish your social security number to our agency:

FEDERAL LAWS:

42 U.S.C.A. §666(a)(13) requires the social security number of any applicant for a professional license or occupational license be recorded on the application for license; and

If you are a licensed health care practitioner, **45 C.F.R., Part 61, Subpart B, §61.7** requires the social security number as part of the mandatory reporting we must do to the Healthcare Integrity and Protection Data Bank (HIPDB), of any final adverse licensing action against a licensed health care practitioner.

HAWAII REVISED STATUTES ("HRS"):

§576D-13(j), HRS requires the social security number of any applicant for a professional license or occupational license be recorded on the application for license; and

§436B-10(4) HRS which states that an applicant for license shall provide the applicant's social security number if the licensing authority is authorized by federal law to require the disclosure (and by the federal cites shown above, we are authorized to require the social security number).

FEES

Make check payable to: COMMERCE & CONSUMER AFFAIRS (unless otherwise noted).

Note: One of the numerous legal requirements that you must meet in order for your new license to be issued is the payment of fees as set forth in this application. You may be sent a license certificate before the payment you sent us for your required fees is honored by your bank. If your payment is dishonored, you will have failed to pay the required licensing fee and your license will not be valid, and you **may not** do business under that license. Also, a \$25.00 service charge shall be assessed for payments that are dishonored for any reason.

RETURN OF REQUIRED ITEMS

Mailing Address:

Board of EASLA
DCCA, PVL Licensing Branch
P.O. Box 3469
Honolulu, HI 96801

Office location:

335 Merchant Street, Room 301
Honolulu HI 96813

RELEASE OF INFORMATION

If an agency or individual is assisting you with the licensure process, we will not be able to release any information to them unless you provide us with authorization. If you wish to do so, please complete the portion on **Release of Information to Third Party**, sign and date it.

RESPONSE

You will receive a deficiency notice or an approval notice upon receipt of all required documents and review of your application.

If for any reason you are denied the registration or license you are applying for, you may be entitled to a hearing as provided by the Hawaii Administrative Rules, Title 16, Chapter 201, and/or Chapter 91, Hawaii Revised Statutes. Your written request for a hearing should be directed to the agency that issues your registration or license and must be received within 60 days of the date that your application for registration or license has been denied.

ABANDONMENT

Pursuant to HRS §436B-9 your application shall be considered abandoned and shall be destroyed if you fail to provide evidence of continued efforts to complete the licensing process for two consecutive years. The failure to provide evidence of continued efforts includes but is not limited to: (1) failure to submit any required information and documents requested by the licensing authority within two consecutive years from the last date the documents and information were requested, or (2) failure to complete any additional requirements for licensure that remain after approval of your application, such as attempting to complete an exam requirement, within two consecutive years from the date your application was approved, or (3) failure to provide the licensing authority with any written communication during two consecutive years indicating that you are attempting to complete the licensing process. If an application is deemed abandoned the applicant shall be required to reapply for licensure and comply with the licensing requirements in effect at the time of the reapplication.

LAWS & RULES PUBLICATIONS

You must certify to reading, understanding, and agreeing to comply with the Hawaii Revised Statutes and Hawaii Administrative Rules governing this license area. Please see below for the chapter numbers of the applicable Hawaii Revised Statutes and Hawaii Administrative Rules. To obtain a copy of the statutes and rules, send a written request to: Board of EASLA, Commerce & Consumer Affairs, P.O. Box 3469, Honolulu, Hawaii 96801. In addition, you may download the statutes and rules from the following site: www.hawaii.gov/dcca/areas/pvl. Look under "Engineer, Architect, Surveyor & Landscape Architect".

For Surveyors, you should be familiar with Chapter 464, Chapter 115, and Chapter 436B.

LICENSURE & RENEWAL

After all requirements are fulfilled, license fees will be due. Notification of amounts will be sent to you at the appropriate time.

For Surveyors, all licenses (regardless of issuance date) will expire on **April 30 of each EVEN-NUMBERED year** and are subject to renewal by the license expiration date. Renewals received after the license expiration date are subject to late renewal fees and may be restored up to 2 years. After 2 years, a new application for licensure is required.

CHANGE OF ADDRESS

Whenever you have a change of address, please report it to the department in writing so that your records can be updated.

This material can be made available for individuals with special needs. Please call the Licensing Branch Manager at (808) 586-3000 to submit your request.

APPLICATION FOR LICENSURE - LAND SURVEYOR

State of Hawaii Board of Engineers, Architects, Land Surveyors & Landscape Architects

Approved: FS _____ PS _____ STATE _____

Passed: FS _____ PS _____ STATE _____

License No: _____ Date Licensed _____
 LS - _____

Place a checkmark next to your pathway to licensure and circle your education level:

#1 Via Endorsement

Licensed in _____ License No. _____

(State)

Education Level: 1 2 3 4 Years of Experience: _____

a. _____ with NCEES exam
 Passed FS exam in _____ on _____
 (State) (Date)

Passed PS exam in _____ on _____
 (State) (Date)

b. _____ without NCEES exam

#2 Via NCEES exams

_____ Application for FS exam
 • Education Level : 1 2 3 4 5 Years of Experience: _____

_____ Application for PS exam
 • Education Level : 1 2 3 4 Years of Experience: _____

_____ Application for FS and PS exam
 • Education Level : 1 2 3 4 Years of Experience: _____

BOARD USE

Legal Name (First-Middle) _____ (LAST) _____ Social Security No. _____ Phone No. (days) _____

Residence Address (Include Apt. No., City, State & Zip Code) _____ Indicate exam date applying for:
 FS _____ PS _____ STATE _____

Mailing Address (ONLY if different from above) _____ Employer's Name, Address & Phone No. _____

Other Names used: _____

Circle answers and provide detailed explanation and supporting documents if applicable.

(1) Are you at least 18 years old? YES NO

(2) Are you a U.S. citizen, a U.S. national, or an alien authorized to work in the United States? YES NO

(3) Have you ever applied for or been licensed as a Land Surveyor in Hawaii? YES NO

If "YES" indicate the MONTH and YEAR: _____ or LICENSE NUMBER: _____

(4) In the past 20 years have you been convicted of a crime in which the conviction has not been annulled or expunged? YES NO

(5) Has any license ever been suspended, revoked or otherwise subject to disciplinary action? YES NO

(6) Are there any disciplinary actions pending against you? YES NO

EXPLAIN "YES" RESPONSES, PROVIDING DATES, PLACES, AND TYPE OF CONVICTION OR DISCIPLINARY ACTION ON A SEPARATE SHEET AND SUBMIT PERTINENT DOCUMENTATION FROM THE COURTS OR LICENSING AUTHORITY. Attach pertinent documentation if applicable.

EDUCATION	Name & Location of School	Dates (Mo/Yr)		Date Graduated	Degree Received	Major
		From	To			
	Engineering College/University					
	Other College/University					

(CONTINUED ON BACK – SIGNATURE REQUIRED ON PAGE 2)

App	244	\$75	Reg	245	\$50
Exam (State)	254	\$80	CRF	247	\$35/70
			½ Renewal	240	\$40
			Service Charge	BCF	\$25

EXPERIENCE RECORD (You may attach additional sheets provided that the information is in this format)

ENGAGEMENT NUMBER	DATES (mo/yr) TIME (yrs & mos)			TITLE OF POSITION, NAME OF EMPLOYER & CHARACTER OF EACH EMPLOYMENT. <i>Designate each employment or change in position by a separate letter and a ruled line extending across page. Include magnitude & complexity of work on which engaged, your duties & degree of responsibility. Have in mind that the Examining Committee is more interested in your specific duties rather than the number of persons employed or over-all cost of projects.</i>	YOUR SUPERVISOR	
	FROM	TO	TOTAL TIME		NAME & ADDRESS	Licensed Land Surveyors?
				SUMMARY (By Applicant)		
				TOTAL EXPERIENCE		
				SUMMARY (By Board)		

AFFIDAVIT OF APPLICANT:

I certify that the statements, answers and representations made in this application and documents attached are true and correct. I understand that any misrepresentation is grounds for refusal or subsequent revocation of my license and is a misdemeanor (Section 710-1017, Section 436B-19, and Section 464-10, Hawaii Revised Statutes). I further certify that I have read, understand and agree to comply with the provisions of Hawaii Revised Statutes, Chapter 464 and Hawaii Administrative Rules, Chapter 115.

_____ Date

_____ Signature of Applicant

Release of Information to Third Party:

To assist me in the licensing process, I authorize the Board and staff to release any and all information regarding my application (including but not limited to, application status) to:

Print Name of Individual who is assisting you: _____

_____ Signature of Applicant

_____ Date

This material can be made available for individuals with special needs. Please call the Licensing Branch Manager at (808) 586-3000 to submit your request.

VERIFICATION OF SUPERVISION - LAND SURVEYOR

The applicant named below has applied for licensure by examination or endorsement with the Board of Professional Engineers, Architects, Surveyors and Landscape Architects. The Board rules require that an applicant for licensure must have worked for a specified number of years under the supervision of licensed land surveyor(s). To verify this period of supervision, this form shall be completed by the applicant's supervisor and mailed to: **Board of Professional Engineers, Architects, Surveyors and Landscape Architects, P.O. Box 3469, Honolulu, Hawaii 96801.**

Name of Applicant:	Name of Supervisor:
Name of Employer:	Address of Supervisor:
1. The applicant worked under my supervision from _____ to _____.	Total Yrs _____ Mos _____.
2. During the time indicated above, I was licensed as a Land Surveyor :	
Certificate No. _____ Date of Licensure _____ State _____	
3. What was the scope of your supervision?	
4. Please describe specific assignments given to applicant on projects while under your supervision:	
5. Other comments regarding the applicant:	

I hereby certify that the statements and answers contained in this verification regarding the person named as applicant are true and correct to the best of my knowledge; and the statements given regarding myself are true and correct.

_____ Date

_____ Signature of Supervisor

VERIFICATION OF EXPERIENCE IN RESPONSIBLE CHARGE – LAND SURVEYOR

State of Hawaii, Board of Engineers, Architects, Surveyors & Landscape Architects

Access this form via website at: www.hawaii.gov/dcca/areas/pvl

The applicant named below has applied for licensure by endorsement with the Board of Professional Engineers, Architects, Surveyors and Landscape Architects. The Board rules allow an applicant to waive the examination or qualify for licensure on the basis of experience in responsible charge. To verify this period of experience, this form shall be completed by a licensed surveyor and mailed to: **Board of Professional Engineers, Architects, Surveyors and Landscape Architects, P.O. Box 3469, Honolulu, Hawaii 96801.**

NAME OF APPLICANT:		NAME OF LICENSED SURVEYOR VERIFIER:
FROM	TO	DESCRIPTION OF LAND SURVEYING WORK

I hereby certify that I have knowledge of the applicant's land surveying experience as stated above in which the applicant was in responsible charge of the land surveying work.

_____ Date

_____ Signature of Licensed Land Surveyor Verifier

Print Name _____

Address _____

Phone _____

License No. _____ State of _____
Licensure: _____

VERIFICATION OF EXAM/LICENSE - ENGINEERS, ARCHITECTS, LAND SURVEYORS, AND LANDSCAPE ARCHITECTS

State of Hawaii
Board of EASLA

Access this form via website at: www.hawaii.gov/dcca/areas/pvl

A P P L I C A N T	<i>APPLICANT: Complete top of this page and forward to ORIGINAL state of license.</i>				
	Name (First, Middle)		(LAST)	Other Names used:	
	Address (Include apt. no., city, state and zip code)			Social Security No.	
				Phone No.	
	License No.			Date Issued	
				Circle type of License Held:	
		PE	ARCH	LAND ARCH	LAND SURVEYOR
I hereby authorize the licensing agency in the State of _____ to furnish to the Department of Commerce and Consumer Affairs, State of Hawaii, the information below.					
Date _____ SIGN HERE: _____					

PART II - FOR STATE BOARD ONLY TO COMPLETE

The above-named person is applying for license in the State of Hawaii. Please complete all information below, affix your board seal and mail directly to:
 BOARD OF EASLA
 DCCA, PVL LICENSING BRANCH
 P.O. BOX 3469
 HONOLULU, HI 96801

	PROFESSIONAL ENGINEER	ENGINEER IN TRAINING	ARCHITECT	LANDSCAPE ARCHITECT	LAND SURVEYOR	CURRENT & GOOD STANDING
Certificate Number	_____	_____	_____	_____	_____	[] License is in good standing.
Date Issued	_____	_____	_____	_____	_____	[] If any pending action or past sanctions, please explain on reverse side.
Valid Until	_____	_____	_____	_____	_____	
Date Applied	_____	_____	_____	_____	_____	

EIT accepted from (name of states):	Indicate DISCIPLINE OF ENGINEERING examined in (Use "NA" if not applicable):
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Examination Subjects	No. of Hours	Grade Obtained	Passing Grade Required	Month & Year Passed	Uniform NCEES, NCARB or CLARB exam?

BY: _____
 TITLE: _____
 DATE: _____

BOARD SEAL
(if none, please state none)