



Janet T. Mills
Governor

STATE OF MAINE
DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION
OFFICE OF PROFESSIONAL AND OCCUPATIONAL REGULATION
BOARD OF LICENSURE FOR PROFESSIONAL LAND SURVEYORS



Joan F. Cohen
Commissioner

Penny Vaillancourt
Director

CERTIFICATION OF EXPERIENCE – PROFESSIONAL LAND SURVEYOR

Applicant Name: _____

Applicants' experience includes significant responsibility in the following areas:

- _____ Research
- _____ Field Work
- _____ Computations
- _____ Data Analysis
- _____ Plan Development
- _____ Drafting or Written Descriptions
- _____ Reports
- _____ Correspondence

Experience includes teaching topics in elementary or advanced surveying, or another curriculum of the application of surveying to real property: ☐ Yes ☐ No

If yes, what percentage of the required 24 months of experience was in teaching? _____%

By my signature, I hereby certify that the information provided on this form is true and accurate to the best of my knowledge and belief.

Supervisor Signature: _____ Date: _____

Applicant Signature: _____ Date: _____

Office Location: 76 Northern Avenue, Gardiner, Maine 04345
Mailing Address: 35 State House Station, Augusta, Maine 04333

[Board of Licensure for Professional Land Surveyors | Office of Professional and Occupational Regulation](#)

Phone: (207) 624-8522

TTY: Please Call Maine Relay 711

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