



**Certificate Replacement
Declaration Form**

A. In the Matter of a request to replace my OLS Certificate

I, _____
(Full name, please print)

of the city/township of _____ in the Province of _____

Declare that

My full legal name is _____

My original certificate of membership was issued on (mm/dd/yy) _____

(Please give explanation of the loss or reason for request below)

I hereby undertake that if the original certificate of membership is ever recovered, it will be forwarded forthwith to the Association of Ontario Land Surveyors.

x _____
Signature Date

B. TOTAL AMOUNT OF FEE REMITTANCE

__ Visa / __ MasterCard

Card# _____

Expiry Date: ____/____ CVV# _____

Exact name on Card x _____
Signature of Card Holder Date

A convenience fee of 3% will be charged for credit card payments.

Company Cheque Personal Cheque

To pay by cheque, record your OLS No. on the front of the cheque and make it payable to: The Association of Ontario Land Surveyors.

FEES DUE: \$56.50 (\$50.00 + \$6.50) Fee Paid: HST # 10673 3009 RT

C. I declare that the information contained on this form is true and complete. I also authorize the AOLS to charge the above credit card, if credit card payment information for the amount specified above has been provided. _____

Signature