



New Jersey Office of the Attorney General

Division of Consumer Affairs

New Jersey State Board of Dentistry

124 Halsey Street, 6th Floor, P.O. Box 45005

Newark, New Jersey 07101

(973) 504-6405

To: Licensed Dentists

From: Licensing Department

Subject: Request for Branch Office Registration

The Statutes governing the practice of Dentistry require that a licensee display a current registration certificate in a conspicuous place in plain view of patients. Likewise, a branch office certificate is required to be issued for every location in which a licensed dentist practices. You must submit a separate request for each location where you need a branch office registration.

The Branch Office fee for dentists is \$90 if you apply during the first year of a licensing period. The fee is \$45 if you apply during the second year of a licensing period. Your branch(es) will be linked to your primary license, and must be renewed with your dentist license every two years. The renewal fee is currently \$90 for each biennial licensing period.

Name of Dentist: _____

License Number: _____

BRANCH OFFICE REGISTRATION REQUESTED AT THE FOLLOWING LOCATION:

Business Name: _____

Street Address: _____

City/State/Zip: _____

Telephone Number: (_____) _____

Please submit this form by email to Dentistry@dca.njoag.gov. The Board office will then email you an invoice to pay the appropriate fee with a credit card online at: <https://newjersey.mylicense.com/eGov/Login.aspx>.