



New Jersey Office of the Attorney General

Division of Consumer Affairs
State Board of Professional Planners
124 Halsey Street, 3rd Floor, P.O. Box 45016
Newark, New Jersey 07101
(973) 504-6465



License Activation Form for Professional Planners

Please submit a check or money order payable to the State of New Jersey, in the amount of \$130.00 if approved in the first year of the biennial renewal period or \$65.00 if approved during the second year of the biennial renewal period. *(Licensees should understand that if the fee is paid with a personal check, and the check is returned by the bank due to insufficient funds, the next step in the process will be delayed until the fee is paid.)*

Your wall certificate will show your first name, middle name and last name. You must spell out your first and last names completely.

Please type or print clearly.

Name _____

Mailing address _____
Street or P.O. Box (one line address only)

City

State

ZIP code

County

Home phone # _____ *(please include area code)*

Cell phone # _____ *(please include area code)*

Work phone # _____ *(please include area code)*

Email address _____

Date

Signature

Note: If you hold a New Jersey State Board of Professional Planners license, please provide the license number:

License No. _____

For Office Use Only

Date received _____ Amount _____ Staff _____

License issuance date _____ License number _____