



## **TEXAS BOARD OF PROFESSIONAL GEOSCIENTISTS**

*P.O. Box 13225 • Austin, Texas 78711 • (512) 936-4408 • [www.tbpg.state.tx.us](http://www.tbpg.state.tx.us)*

### **Firm Registration Renewal Application**

Please complete this form and mail it with the applicable fee to the Board at the address indicated above. Complete all sections marking N/A where applicable; sections III, IV or V are only necessary if the information has changed.

#### **SECTION I. Information.**

**Firm Legal Name:** \_\_\_\_\_ **Firm #** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_

**DBA (if applicable):** \_\_\_\_\_

**Headquarters Business Address:** \_\_\_\_\_

\_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip  
**Main Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **Website:** \_\_\_\_\_

**Hours of Operation:** \_\_\_\_\_

☐ **Mailing address** (if different from headquarters address):

\_\_\_\_\_ Street or P O Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip

Professional Geoscientist (P.G.) in responsible charge of geoscience work in Texas at this office:

**Name:** \_\_\_\_\_ **TX P.G. License #:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **Email:** \_\_\_\_\_

#### **SECTION II. Type of Firm/Fee:** (Check all that apply)

☐ \$300 -- Firm Registration fee

☐ \$50 -- Late penalty

**Total amount submitted for this renewal: \$** \_\_\_\_\_

#### **SECTION III. Subsidiary and Branch Offices** offering geoscience services to the public in Texas:

(Provide an additional sheet for a list if necessary.) ☐ **None or N/A**

**1) Branch Name:** \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State

**Mailing Address:** \_\_\_\_\_

\_\_\_\_\_ Street or P O Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip  
**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Hours of Operation:** \_\_\_\_\_

Professional Geoscientist in responsible charge of geoscience work for Texas in this office:

**Name:** \_\_\_\_\_ **Texas P.G. License #:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

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2) Branch Name: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Street or P O Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Hours of Operation: \_\_\_\_\_

Professional Geoscientist in responsible charge of geoscience work for Texas in this office:

Name: \_\_\_\_\_ Texas P.G. License #: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

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3) Branch Name: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Street or P O Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Hours of Operation: \_\_\_\_\_

Professional Geoscientist in responsible charge of geoscience work for Texas in this office:

Name: \_\_\_\_\_ Texas P.G. License #: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

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**SECTION IV. Officers or Directors.** (per Board Rule §851.30(c) (2)):

(An additional sheet and/or attached list may be provided that includes the following information for each Officer, Director, and/or authorized individual, if necessary.) ☐ **No changes**

Name \_\_\_\_\_ Business Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_ Title: \_\_\_\_\_

Name \_\_\_\_\_ Business Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_ Title: \_\_\_\_\_

Name \_\_\_\_\_ Business Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_ Title: \_\_\_\_\_

Name \_\_\_\_\_ Business Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_ Title: \_\_\_\_\_



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### **SECTION V. Other P.G.s in responsible charge of geoscience work on behalf of the firm.**

(TBPG Rule §851.30(d) and §851.152).

An additional sheet or attached list may be provided, if necessary. ☐ **No changes**

Name _____	Business Address _____	City _____	State _____	Zip _____
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Business Phone: _____	Current Texas P.G. #: _____
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Name _____	Business Address _____	City _____	State _____	Zip _____
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Business Phone: _____	Current Texas P.G. #: _____
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Name _____	Business Address _____	City _____	State _____	Zip _____
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Business Phone: _____	Current Texas P.G. #: _____
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### **SECTION VI. Affirmation.**

According to TBPG Rule 851.28(e), a firm applying for renewal of their geoscience registration must submit a written statement affirming that they did not perform or offer to perform geoscientific services for the public during the time their registration was expired.

**Please note:** *There is no grace period for practicing with an expired registration.*

1. At this time, is your firm's geoscience registration expired? ☐ Yes ☐ No

**If your answer to question 1 is yes, please answer question 2.**

2. If the registration is expired, did your firm perform or offer to perform non-exempt geoscience services to the public in Texas during the time your registration was expired? ☐ Yes ☐ No

**If your answer to question 2 is yes, TBPG will contact you for more information.**

Please note: Having offered and/or performed non-exempt geoscientific services while a registration is expired is a violation each day that it occurs. A firm that does so is subject to disciplinary action as determined by the Board. Upon receipt of this form, TBPG staff will open a complaint against any firms doing so, if appropriate. However, the Board will consider all factual circumstances surrounding the possible violation(s) in its determination of whether it finds violations and what disciplinary actions to take, if any.

### **SECTION VII. Verification by the Authorized Official of the Firm (AOF).**

All information submitted herein is true and correct; further, no information has been withheld that might be relevant to this application.

Name of Authorized Official of the Firm (AOF): \_\_\_\_\_

Signature of AOF: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail address: \_\_\_\_\_