TEXAS BOARD OF PROFESSIONAL ENGINEERS AND LAND SURVEYORS



1917 S. Interstate 35, Austin, Texas 78741-3702

PH.: 512/440-7723 FAX: 512/442-1414

E-mail: licensing@pels.texas.gov
WebSite: http://pels.texas.gov

Engineering or Surveying Firm Registration Information Update Form

Name of Firm:	Registration # (if available):
dba (if applicable):	
Total number of employees (including P.E.s or R.P.L.S.s):	EIN:
Physical Address:	
Mailing Address:	
Phone:	Fax:
E-mail:	
Subsidiary or Branch Office(s) offering engin (If necessary, please provide an additional sheet	eering or surveying services to the public in Texas with the applicable information.)
1. Office Name:	
Physical Address:	
City, State, Zip:	
Office Phone:	Fax:
E-mail:	
Name of Engineer or Surveyor in responsible charge of w	ork in Texas in this office:
2. Office Name:	
Physical Address:	
City, State, Zip:	
Office Phone:	Fax:
E-mail:	
Name of Engineer or Surveyor in responsible charge of w	ork in Texas in this office:
3. Office Name:	
Physical Address:	
City, State, Zip:	
Office Phone:	Fax:
E-mail:	
Name of Engineer or Surveyor in responsible charge of w	ork in Texas in this office:

Officer(s) and/or Director(s) of Firm or Sole-Practitioner, mandatory per Board Rules: (If necessary, please provide an additional sheet with the applicable information.)

1. Name:	Position/Title:
Business Address:	
City, State, Zip	
Business Phone:	Fax:
2. Name:	Position/Title:
Business Address:	
City, State, Zip	
Business Phone:	Fax:
3. Name:	Position/Title:
Business Address:	r osition, much
City, State, Zip	
Business Phone:	Fax:
business i none.	I dA.
	E.s or R.P.L.S.s employed to practice engineering or surveying in Texas on behalf of the
firm. Mandatory	
1. Name:	(If necessary, please provide an additional sheet with the applicable information.) Position/Title:
Business Address:	
City, State, Zip:	
Business Phone:	P.E. or R.P.L.S. Number
2. Name:	Position/Title:
Business Address:	
City, State, Zip:	
Business Phone:	P.E. or R.P.L.S. Number:
3. Name:	Position/Title:
Business Address:	Positiony fitte.
City, State, Zip:	D.F. or D.D.I.C. Niveskov
Business Phone:	P.E. or R.P.L.S. Number
Name of Remitter	r: Date: