



Occupational and Professional Licensing Administration

Request for Letter of Certification

Use this form to request an official Letter of Certification for your District of Columbia license. Print or type all information on this form and include the correct fees. Certifications can be sent via regular mail in approximately two weeks or email within 72 hours.

LICENSEE NAME _____

License Type _____ License Number _____

Fee: \$30.00 for each letter of certification

Please enclose **certified check or money order** made payable to "DC Treasurer."
Please note: we are unable to accept checks from Navy Federal Credit Union. Do not send cash.

SEND YOUR REQUEST TO:

Occupational and Professional Licensing Administration
1100 4th Street, SW, Suite 500
Washington, DC 20024

AMOUNT ENCLOSED: \$ _____ (\$30/each certification)

REQUEST SHOULD BE SENT VIA MAIL TO:

Name _____

Street _____

City _____ State _____ Zip _____

REQUEST SHOULD BE SENT VIA EMAIL TO:

_____@_____.

If the above information was different at the time you were tested, please indicate former name or address below:

Name _____

Street _____

City _____ State _____ Zip _____

Licensee Signature

_____ Date _____