

ORDER FORM

Purchase Licensure/Registration Documents – Duplicate Certificate/Duplicate Renewal Card

- Duplicate certificate (license/registration) - \$25 X _____ duplicate(s).**
- Duplicate renewal card (license/registration) - \$25 X _____ duplicate(s).**
- Duplicate certificate (LA/MS/GA permit) - \$25 X _____ duplicate(s).**
- Duplicate renewal card (LA/MS/GA permit) - \$25 X _____ duplicate(s).**

Please complete the following information (print or type clearly):

Name: _____

Address: _____

Street

City/State/Zip

E-mail Address: _____

Phone: _____

Date: _____

Reason for Request:

- Original lost or destroyed
- Satellite Office
- Other (Please explain): _____

Please return this form along with payment to the Iowa Dental Board.

Make check or money orders payable to the Iowa Dental Board. The fee must be received in the Board office prior to release of the materials.

Mail form and payment to:

Iowa Dental Board
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687