Nebraska State Board of Landscape Architects

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Questions? Contact us at nsbla.board@nebraska.gov or on the web at nsbla.nebraska.gov

LICENSE REINSTATEMENT AFFIDAVIT

STATE OF:	<u> </u>
COUNTY OF:	_
Applicant's Printed Name	, being first duly sworn upon oath, deposes and says
that I did not provide or solicit landscape architectural	services in the State of Nebraska during the period of
apsed or expired license.	
	Analizanda Circatura
	Applicant's Signature
Subscribed and sworn to before me, a Notary Public, th	nisday of Day Month Year
	Notary Public Signature
	···
	 :
	(Place Imprint of Notary Seal Above)