

**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION
BOARD OF REGISTRATION FOR PROFESSIONAL
ENGINEERS AND SURVEYORS**

**Instructions for completing application packet for
Temporary Permit to practice Engineering in South Carolina**

**Notice to Applicants: ONLY COMPLETE APPLICATION PACKETS WILL BE ACCEPTED FOR PROCESSING.
Incomplete packets will be returned to the applicant.**

Fees: The non-refundable fee of \$80.00 must accompany this application. When you provide a check as payment, you authorize us to use information from the check to make a one-time electronic fund transfer from your account, or to process the payment as a check transaction. You authorize us to collect a fee through electronic fund transfer from your account if your payment is returned unpaid.

NOTE: If your company will provide engineering services in South Carolina and the company is not currently licensed in this state, you must apply for a Temporary Certificate of Authorization or license the company prior to the company providing services in South Carolina.

Education.

Official transcripts are required for all applicants. Transcripts may accompany the completed application packet or be sent directly to the Board office. **All transcripts from colleges and universities in the United States must arrive at the Board office in an envelope sealed by the Registrar. Electronic transcripts are accepted from the institution and may be emailed directly to the Board at Contact.EngLS@lir.sc.gov. For NCEES Record holders, **THIS SECTION MUST STILL BE COMPLETED**, but no transcripts need to be submitted unless additional education has been earned and not included in the NCEES Record.**

For applicants holding a degree from a foreign school, "Certified True Copies" of education documents can be accepted for evaluation. Documents must include courses taken and grades for each year attended, degree awarded and date of degree. Documents translated by entities other than the issuing authority must include a signed statement indicating that the translation is accurate. All degrees other than those accredited by EAC/ABET, CEAB, or the Washington Accord require evaluation which requires an **additional fee of \$200.00** and the process may take two to three weeks.

Licensure.

Verification of examination and/or licensure will be accepted on either the Board-approved form or one generated by another jurisdiction. Applicants may access contact information for all NCEES jurisdictions online at <http://www.ncees.org> or by calling 1-800-250-3196.

Completed forms should bear the official seal of the state board providing verification. If an official seal is unavailable, the form must remain in an envelope signed/sealed by the state board providing verification.

The applicant must answer all questions.

Project.

The applicant must provide all relevant and requested information regarding the project to be performed.

Commencement of Services.

The applicant must indicate whether or not engineering services related to the project have commenced prior to issuance of the temporary permit. If services have commenced, a complete description must be furnished.

Termination of Services.

The applicant must notify the Board in writing of the termination of the project or the applicant's services, whichever occurs first.

Background Information and Affidavits.

Applicant must answer all questions and execute and sign both affidavits.

§40-22-260(A). Temporary Registration for Recent Resident or Non-resident:

Upon application to and approval by the board and payment of the fee provided in regulation, the board shall grant a temporary license for engineering work on **one specified** project in this State for a period not to exceed **one year** to an engineer who has recently become a resident of this State, or is a nonresident having no established place of business in this State, who meets the qualification requirements for licensure in this State and who holds a valid license to practice in another state. An engineer may not renew a temporary certificate at its expiration date and may not apply for temporary licensure in connection with more than one specific project in any three-year period.



South Carolina Department of Labor, Licensing and Regulation

South Carolina Board of Registration for

Professional Engineers and Surveyors

110 Centerview Dr. • Columbia • SC • 29210 (overnight)

P.O. Box 11597 • Columbia • SC 29211-1597 (mailing)

Phone: 803-896-4422 • Contact.ENGLS@llr.sc.gov • Fax: 803-896-4427

llr.sc.gov/eng

APPLICATION FOR TEMPORARY PERMIT FOR THE PRACTICE OF ENGINEERING

INSTRUCTIONS

Submit the following with your application to the above address:

- Check or money order only in the amount of \$80 made payable to LLR – Board of Engineers & Surveyors. **Fee is non-refundable. NO CASH IS ACCEPTED.**
A return check fee of up to \$30, or an amount specified by law, may be assessed on all returned funds.
- Copy of your valid Driver’s License, State Issued ID, or Passport.
- Copy of your Social Security Card.

GENERAL INFORMATION

Applicant Name: _____

Home Address: _____
Street or P.O. Box City, State Zip

Home Telephone: _____ Email: _____

Business Name: _____

Business Address: _____
Street or P.O. Box City, State Zip

Business Telephone: _____ Business Email: _____

Position Title: _____

SSN: _____ DOB: _____ Sex: Male Female

EDUCATION (Transcripts Required). List undergraduate and graduate degrees, degree received (including major) and date of degree. If degree is not accredited by EAC/ABET, education must be evaluated by the Board’s Education Consultant. The education evaluation requires an additional fee and the process may take two to three weeks.

Name and Location of Institution	Years Attended (From – To)	Date Graduated (Month/Day/Year)	Degree Received/Major

LICENSURE (List current license number(s) and basis of registration.)

State: _____ Lic. Number/Date/Basis: _____

State: _____ Lic. Number/Date/Basis: _____

FE: State/Date/Cert. No./Hours of Exam: _____

PE: State/Date/Cert. No./Hours of Exam: _____

If denied registration as EIT/PE, name state and why denied: _____

List any state in which license has been revoked/suspended and reason: _____

Have you been licensed as a PE in SC? YES NO
 If so, indicate date license lapsed and license number: _____

Have you been issued a Temporary Permit in SC before? YES NO
 If so, list number and date: _____

Do you have an NCEES Council Record? YES NO

PROJECT

(a) Description of Project		
(b) Location of Project		
(c) Name of Client		
(d) Scope of Your Professional Responsibilities for Project:		
(e) Estimated Dates of:	Commencement of Professional Services	
	Commencement of Project Construction	
	Completion of Project Construction	
	Completion of Professional Services	

COMMENCEMENT OF SERVICES

[Note: Under South Carolina law, all engineering services (including design) for projects located within this State must be furnished under the Responsible Charge of an engineer licensed in this State. Certain exceptions are, however, made for federal and prototypical designs.]

Have you performed any services related to the engineering responsibilities described under Section 5(c) above prior to your application of a Temporary Permit? (If yes, furnish a description of such advance services provided, and the name of the individual in responsible charge for such work - use a separate sheet of paper and attach to this application.)

YES NO

TERMINATION OF SERVICES

Do you agree to notify this Board in writing following termination of the project, or termination of your services – whichever shall first occur?

YES NO

BACKGROUND INFORMATION

If your answer to any of the questions below is yes, please explain in detail on a supplemental sheet and attach official court papers.

- 1. Have you surrendered or allowed a professional or occupational registration/license to lapse in any jurisdiction due to any pending or threatened disciplinary action? YES NO
- 2. Have you been found by a court or registration board to have violated the engineering registration laws or the professional/occupational laws of any jurisdiction? (If yes, provide dates and details including results of any appeals, if not previously provided to this board.) YES NO
- 3. Have you entered into any negotiated settlement, consent order, or other agreement with regard to allegations involving violation of professional or occupational registration laws? (If yes, provide dates details, if not previously provided to this board.) YES NO
- 4. Have you ever been convicted of or pled guilty or nolo contendere to a felony crime of any kind or to a non-felony crime that involved drugs, dishonesty, or moral turpitude? YES NO
- 5. Currently, are you being treated, or within the last five years, have you been treated for drug or alcohol addiction that might interfere with your ability to competently and safely perform the essential functions of practice? YES NO
- 6. Currently or within the last five years, have you developed any disease or conditions, physical, mental, or emotional that might interfere with your ability to competently and safely perform the essential functions of practice? YES NO

AFFIDAVIT

Temporary Permit - Certification of Responsible Charge for Engineering Design Project

I, _____, licensed professional engineer in the State of _____ and applicant for temporary permit to engage in the practice of professional engineering in the State of South Carolina, do hereby attest:

(a) that I have not and will not assume supervisory control (responsible charge) for any engineering and/or other design services to be provided under the Temporary Permit until said Permit has been issued by the State of South Carolina, and

(b) that I will not knowingly assume supervisory control for any on-going work for any engineering and/or other design services to be provided under the Permit where such work has not been performed by or under the direct supervisory control of an engineer properly licensed by the State of South Carolina.

Applicant Signature _____
Print Applicant Name

Sworn and Subscribed before me this _____ day of _____, 20____

Notary Signature

Print Name

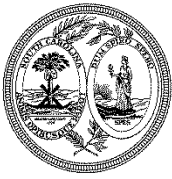
Notary Public for

Commission Expiration Date

PRIVACY DISCLOSURE

South Carolina Law requires that every individual who applies for an occupational or professional license provide a social security number for use in the establishment, enforcement and collection of child support obligations and for reporting to certain databanks established by law. Failure to provide your social security number for these mandatory purposes will result in the denial of your licensure application. Social security numbers may also be disclosed to other governmental regulatory agencies and for identification purposes to testing providers and organizations involved in professional regulation. Your social security number will not be released for any other purpose not provided for by law.

Other personal information collected by the Department for the licensing boards it administers is limited to such personal information as is necessary to fulfill a legitimate public purpose. The South Carolina Freedom of Information Act ensures that the public has a right to access appropriate records and information possessed by a government agency. Therefore, some personal information on the application may be subject to public scrutiny or release. The Department collects and disseminates personal information in compliance with The South Carolina Freedom of Information Act, the South Carolina Family Privacy Protection Act, and other applicable privacy laws and regulations. Additionally, the Department shares certain information on the application with other governmental agencies for various governmental purposes, including research and statistical services.



STATE OF SOUTH CAROLINA
DEPARTMENT OF LABOR, LICENSING AND REGULATION
VERIFICATION OF LAWFUL PRESENCE IN THE UNITED STATES
AFFIDAVIT OF ELIGIBILITY



Pursuant to Section 8-29-10, *et seq.* of the South Carolina Code of Laws (1976, as amended), the Department of Labor, Licensing and Regulation must verify that any person who applies for a South Carolina license is lawfully present in the United States. Complete and sign this affidavit of eligibility. The information provided is subject to verification.

Section A: LAWFUL PRESENCE in the United States.

The undersigned _____, of _____
(Print clearly First, Middle, and Last name) (Home Address, City, State, and Zip Code)
 being first duly sworn deposes and states as follows:

Check only one box:

1. I am a United States citizen; or

2. I am a Legal Permanent Resident of the United States eighteen years of age or older; or

3. I am a Qualified Alien or non-immigrant under the Federal Immigration and Nationality Act, Public Law 82-414, eighteen years of age or older, and lawfully present in the United States.

4. Other: _____ Please submit any documentation that supports this status.

Date of Birth: _____

Alien Number: _____ I-94 Number: _____

(If you checked number 2, 3, or 4 you must attach a copy of your immigration documents. See instruction sheet for a list of accepted immigration documents.)

Section B: ATTESTATION.

I understand that in accordance with section 8-29-10 of the South Carolina Code of Laws, a person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall, in addition to other sanctions imposed by this State or the United States, be guilty of a felony, and upon conviction must be fined and/or imprisoned for not more than 5 years (or both).

I understand that the representations made in this Affidavit shall apply through any license(s) or renewals issued, and that I shall have an affirmative duty to immediately advise the Department of Labor, Licensing and Regulation of any change of my immigration or citizenship status.

I swear and attest the information contained herein is true and correct to the best of my knowledge. I understand that under South Carolina law, providing false information is grounds for denial, suspension, or revocation of a license, certificate, registration or permit.

Signature of Affiant

SWORN to before me this _____ day of _____, 20____

Notary Signature

Print Name

Notary Public for _____

My Commission Expires: _____

INSTRUCTION SHEET FOR COMPLETING AFFIDAVIT OF ELIGIBILITY

CHECK box 1:

If you are a United States Citizen by birth or naturalization

CHECK box 2:

If you are a Legal Permanent Resident and you are not a U.S. Citizen, but are residing in the U.S. under legally recognized and lawfully recorded permanent residence as an immigrant.

PROVIDE A COPY OF ALL IMMIGRATION DOCUMENTS.

CHECK box 3:

If you are a Qualified Alien. You are a Qualified Alien if you are:

An alien who is lawfully admitted for residence under the INA.

An alien who is granted asylum under Section 208 of the INA.

A refugee who is admitted to the United States under Section 207 of the INA.

An alien who is paroled into the United States under Section 212(d)(5) of the INA for a period of at least 1 year.

An alien whose deportation is being withheld under Section 243(h) of the INA (as in effect prior to April 1, 1997) or whose removal has been withheld under Section 241(b)(3).

An alien who is granted conditional entry pursuant to Section 203(a)(7) of the INA as in effect prior to April 1, 1980.

An alien who is a Cuban/Haitian Entrant as defined by Section 501(e) of the Refugee Education Assistance Act of 1980.

An alien who has been battered or subjected to extreme cruelty, or whose child or parent has been battered or subject to extreme cruelty.

PROVIDE A COPY OF ALL IMMIGRATION DOCUMENTS.

ACCEPTED IMMIGRATION DOCUMENTS:

Unexpired Reentry Permit (I-327)

Permanent Resident Card or Alien Registration Receipt Card With Photograph (I-551)

Unexpired Refugee Travel Document (I-571)

Unexpired Employment Authorization Card Which Contains a Photograph (I-766)

Machine Readable Immigrant Visa (with Temporary I-551 Language)

Temporary I-551 Stamp (on passport or I-94)

I-94 (Arrival/Departure Record) in Unexpired Foreign Passport

I-20 (Certificate of Eligibility for Nonimmigrant, F-1, Student Status)

DS2019 (Certificate of Eligibility for Exchange Visitor, J-1, Status)