



Douglas A. Ducey
Governor

Aubrey V. Godwin
Director



COSMETIC LASER DUPLICATE CERTIFICATE REQUEST

If you need a duplicate certificate please fill out the following form and submit it with a payment of \$20 by cash or check (made out to the Laser Safety Fund).

***If you are requesting a duplicate certificate at the time of your renewal submit this form with the renewal form. The fee for a duplicate at time of renewal is only \$10 plus the cost of the renewal.**

Name: _____

CLT #: _____

Address: _____

Address 2: _____

City: _____ State: ____ Zip: _____

Phone Number: _____

Email: _____

Employer(s) Name: _____

Work Phone(s): _____

- My certificate has been lost or stolen so I am requesting a replacement.
- I work at 2 facilities so I need 1 duplicate certificate.
- I work at _____ facilities, so I need _____ duplicate certificates.