Commonwealth of Virginia
Department of Professional and Occupational Regulation
9960 Mayland Drive, Suite 400
Richmond, VA 23233
(804) 367-8506
www.dpor.virginia.gov



Board for Architects, Professional Engineers, Land Surveyors, Certified Interior Designers and Landscape Architects SURVEYOR PHOTOGRAMMETRIST REFERENCE FORM

Instru	ctions					
Applica	t: Complete items #1 through #3 then forward this form to the individual serving as your reference. Only a licensed land surveyor may serve as a reference. All references must have known you for at least one year. Any individual designated as a reference on this form may not verify experience on your Experience Verification Form(s). References cannot be more than one year old at the time the application is received.					
Referei	ce: Complete items #4 through #14. Enclose the form in a <u>sealed envelope with your signature across the sealed flap</u> . Return it to the applicant (for inclusion in their application package) or mail it directly to the Board at the address above. Your prompt response appreciated.					
1.	Applicant's Name					
	Last		irst	Middle		Generation
2.	2. Social Security Number or Virginia DMV Control Number *					
3.	Mailing Address (PO Box accepted)				
			City		State	Zip Code
1	Reference's Name		Oity		State	Zip Code
4.	Last	F	irst	Middle		Generation
5.						
			City		State	Zip Code
6.	Are you a licensed land surveyor or surveyor photogrammetrist?					
	No Yes	State License Number				
7.	What is your business relationshi	p to the applicant?				
8.	How many years have you knowr	the applicant?				
9.	In your opinion, is the applicant of	f good moral character?	Yes	No 🗌	If no, expl	ain below.
	Attach a separate sheet of paper if more space is needed.					
10.	How long has the applicant been engaged photogrammetric work?					
11.	11. What is the applicant's reputation as a surveyor photogrammetrist?					
12.	Do you have any reservations reg	garding the applicant?	No 🗌	Yes	If yes, exp	lain below
13.	Additional comments. If additional space is needed, attach a separate sheet of paper.					

14. Signature

Date