



Replacement Certification Photo ID Card ORDER FORM

If you need to replace a lost, stolen, or damaged Photo ID Card, please complete this form, and mail it to the address listed below with the appropriate payment. You will be issued a new Certification Number.

***If your card was lost or stolen, please submit your police report to avoid Identity Theft of your credential.**

*****You must have been previously issued a Photo ID Certification Card to obtain a replacement.**

*****Photo ID Cards are not issued during the year that your credential (s) is due to expire.**

Today's Date: _____ Date of Birth: _____

☐ OTC® Certification Number: _____ ☐ OT-SC™ Certification Number: _____

☐ Please send me _____ Photo ID Card(s) as indicated below.

I have included payment of \$50.00 for each Photo ID Card that I am requesting:

_____: OTC® Photo ID Card _____: OT-SC™ Photo ID Card

TOTAL PAYMENT ENCLOSED: \$ _____

Acceptable forms of payment made payable to: NBCOT, Inc.

US Bank issued Check (Teller Check, Official Check or Bank Money Order)
US or Canadian Postal, Western Union, or MoneyGram Money Orders.

NO PERSONAL CHECKS or Credit Cards will be accepted.

Please PRINT: (Information must match the information on your Certification record).

*FULL LEGAL NAME: _____
First Middle Last

*HOME Mailing Address: _____ Apt./Unit _____

*City: _____ State: _____ Zip: _____

Email Address: _____ @ _____

*Your Signature: _____ Date: _____

Mail this form with the acceptable form of payment made payable to:
NBCOT, Inc.

Attn: Replacement ID Request
PO Box 349 – Crompond, NY 10517-0349

Please allow 4-6 Business weeks for receipt.