



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.

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