



STATE OF IDAHO DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSING

P.O. BOX 83720
Boise, Idaho
83720-0063
(208)334-3233

dopl.idaho.gov
customer-service@dopl.idaho.gov

PERMIT EXTENSION REQUEST
\$65.00 Non-Refundable fee

All Fields Required

Date: _____

Permit Number: _____

Permit Holder Name: _____

Jobsite Address: _____

City: _____

Zip Code: _____

Phone: _____

Email Address: _____

Signature of Permit Holder

Date

STATE OF IDAHO
DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSES



CREDIT CARD AUTHORIZATION FORM

Idaho Division of Occupational and Professional
Licenses
P.O. BOX 83720
BOISE, ID 83720-0063
Phone:(208)334-3233
Email: customer-service@dopl.idaho.gov

Please email or mail all license applications, permit applications, fees, or forms to the Boise office.

I _____, authorize **The State of Idaho,**
(Please Print Card Holders Name)

Division of Occupational and Professional Licenses, to charge my credit card account in the amount
of \$_____.

This payment is for _____.
(Permit Number payment needs to be applied towards.)

All Fields Below Are Required

VISA MASTERCARD DISCOVER AMERICAN EXPRESS

Debit Cards Accepted – Processed as a Credit

Credit Card Number: _____

Billing Address Zip Code: _____

Expiration Date: _____ / _____ CVC # _____
(CVC: this is the 3digit code located on the back of your card)

_____ _____
Card Holder Signature Date

Contact Phone Number _____

Please note there is an additional 3% charge for payment by credit card.