



**NORTH CAROLINA BOARD OF DIETETICS/NUTRITION**

1000 Centre Green Way, Suite 200,  
Cary, NC 27513  
(919)861-5580, Fax (919)787-4916

**REPLACEMENT ID /CERTIFICATE FORM**

\$20.00 fee for Licensure I.D. card    \$30.00 fee for Certificate

*If requesting a new certificate please send in an affidavit of destroyed property or return your current certificate.*

Licensee name: \_\_\_\_\_

Licensure number: \_\_\_\_\_                      Contact No. \_\_\_\_\_

Email: \_\_\_\_\_

Licensee Current Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Address you want the ID/Certificate mailed to if different than above:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please fill in all the information below. Orders will not be processed if information is left incomplete.**

Form of payment: Check/money order: Check No. \_\_\_\_\_ Or \_\_\_\_\_ Visa \_\_\_\_\_ Master Card

Credit card number: \_\_\_\_\_ Exp. date: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_ Telephone No. \_\_\_\_\_

Signature of card holder: \_\_\_\_\_

\_\_\_\_\_