

# REGISTERED ENVIRONMENTAL HEALTH SPECIALIST 2013 BIENNIAL RENEWAL APPLICATION

**Return to:**

California Department of Public Health  
EHS Registration Program MS 7404  
PO Box 997377  
Sacramento, California 95899-7377

**Active Fees:**

Due 12/31/2013: \$175.00  
Penalty for late payment: \$88.00  
**Postmarked After 1/31/2014: \$263.00**

**Retired/Inactive Fees:**

Due 12/31/2013: \$25.00  
Penalty for late payment: \$13.00  
**Postmarked After 1/31/2014: \$38.00**

**REHS Number:**

Amount enclosed: \$ \_\_\_\_\_

<b>Name – Last</b>	<b>First</b>	<b>Middle</b>	<input type="checkbox"/> Male
			<input type="checkbox"/> Female
<b>Mailing Address – Street/ PO Box</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>Phone – work</b>	<b>Phone - home or cell</b>		
<b>E-mail address</b>	<b>Additional E-mail address</b>		
<b>Employer – Agency or Business</b>	<b>Job Position or Title</b>		
<p><b>The REHS program will review all continuing education coursework submitted as part of the renewal application. Incomplete renewal applications will be returned. Your registration will expire if the application does not include proof that you met the continuing education requirements. If fees are not paid when due, your registration will be suspended.</b></p>			

This information is requested by the California Department of Public Health (CDPH) by the authority of the Health and Safety Code Section 106600-106735 and is needed to enable CDPH to determine if the applicant meets the REHS Program requirements. Failure to submit the necessary information will result in the denial of the application. No interagency or intergovernmental transfers of this information will be made.

Section 106695 of the Health and Safety Code allows biennial registration for retired professionals. As a retired and inactive professional you are not permitted to use the title of Registered Environmental Health Specialist or REHS. In order to qualify you must meet all three of the following requirements and **submit the \$25 biennial fee:**

1. You are over 50 years old or collecting retirement benefits.
2. You have been registered in California as a REHS for at least 10 years or received on the job disabilities before the 10 years elapsed.
3. You are NOT currently employed in a position that requires registration.

**Have you ever been convicted of a crime, if the crime is related to the qualifications, functions and duties of an environmental health specialist? If yes, provide a written explanation on a separate sheet.**

( ) Yes            ( ) No

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE INFORMATION ON THIS RENEWAL FORM AND ANY ACCOMPANYING DOCUMENTS IS TRUE AND CORRECT WITH FULL KNOWLEDGE THAT ALL STATEMENTS ARE SUBJECT TO INVESTIGATION AND THAT ANY FALSE OR DISHONEST ANSWER MAY BE GROUNDS FOR DENIAL OR SUBSEQUENT REVOCATION OF LICENSE.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**FOR CASHIER'S USE**

Environmental Health Specialist Registration Fund No. 335 76101-5676—02