



PAPER DISPLAY CERTIFICATE ORDER FORM

If you would like a paper Certificate of Certification to display, please complete this form, and mail it to the address listed below with the appropriate payment.

*****You must have been previously issued a Photo ID Certification Card in order to obtain a Paper Display Certificate.**
*****New or Replacement Display Certificates and/or Photo ID Certification Cards are not issued during the year that your credential is due to expire.**

Date: _____

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

Please send me _____ Paper Display Certificate(s) as indicated below.

I have included payment of \$35.00 for each display certificate that I am requesting:

_____ : OTC® Certificate _____ : OT-SC™ Certificate

TOTAL PAYMENT ENCLOSED: \$ _____

Acceptable forms of payment: 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.

Information must match the information on your Certification record.

Please PRINT:

Name: _____
First Middle Last (include Jr. Sr. etc.)

HOME Mailing Address: _____
Apt./Unit#

City: _____ State: _____ Zip: _____

Cell/Home Telephone: _____ Work Telephone: _____

Mail this form with acceptable form of payment made payable to:

NBCOT, Inc.
Attn: Paper Certificate Request
4736 Onondaga Blvd. #166
Syracuse, NY 13219-3304

Please allow 4 Business weeks for receipt.