



## CHANGE OF ADDRESS FORM

Business and Professions Code, §§ 136,1650, 1651

**DO NOT FAX**

**Original Signature Required**

<i>FOR OFFICE USE ONLY</i>	
EDP Date _____	Processed By _____
Date Cashiered _____	Am't _____
RC# _____	Cashier _____
FEE DUE:	<input type="checkbox"/> Yes <input type="checkbox"/> No

*\*Attach additional pages if more space is needed in reporting all locations where you practice.*

Name	Last	First	Middle	Dental License Number

New Address (Street and Number)	City	State	Zip Code
Phone Number		Fax Number	
Is this your mailing address?      _____ Yes      _____ No			
Additional Place of Practice (Street)	City	State	Zip Code
Phone Number		Fax Number	
Is this your mailing address?      _____ Yes      _____ No			
Additional Place of Practice (Street)	City	State	Zip Code
Phone Number		Fax Number	
Is this your mailing address?      _____ Yes      _____ No			
Permit number/Type	Permit number/Type	Permit number/Type	Permit number/Type

Signature \_\_\_\_\_ Date \_\_\_\_\_

### INFORMATION COLLECTION AND ACCESS

The information requested herein is mandatory and is maintained by Dental Board of California, 2005 Evergreen Street, Suite 1550, Sacramento, CA 95815, Executive Officer Richard DeCuir, 916-263-2300, in accordance with Business & Professions Code, §136, 1650, and 1651. Disclosure of your personal information on this form is mandatory and collection is authorized by §136, 1650, and 1651 of the Business & Professions Code. Your personal information will be used for compliance with licensing requirements in the Dental Practice Act. If you fail to disclose this information your application will be rejected as incomplete and noncompliant with the Dental Practice Act's reporting and registration requirements (§1600 et seq. of the Business and Professions Code) and may subject you to enforcement action by the Board. Each individual has the right to review the personal information maintained by the agency unless the records are exempt from disclosure. Applicants are advised that the names(s) and address(es) submitted may, under limited circumstances, be made public.