State of Utah
Department of Commerce
Division of Occupational and Professional Licensing

Official Use Only
Number: _____
Date Approved/Denied: _____
Approved/Denied By: _____

Request for Inactive License

APPLICANT INFORMATION

Full Legal Name: _____
First *Middle* *Last*

All Previous Legal Names: _____

Requesting Inactive Status on the following license number: _____

SSN: _____ **Date of Birth:** _____ **Gender:** ☐ Male ☐ Female

Address: _____
Street Address (including Apt/Unit/Ste #) and/or PO Box

_____
City *State* *ZIP Code*

Phone: _____ **Email:** _____

Please Select ONE:

- ☐ I am a United States citizen OR a non-citizen of the United States who is lawfully present.
- ☐ I am a foreign national not physically present in the United States.
- ☐ None of the above, please explain: _____

Drivers License or State ID Card: _____
State of Issue *License Number* *Expiration Date*

NOTE: If you do not hold a US Drivers License or a US State ID, you must present a legible copy of your current and valid government issued document(s) showing evidence of authorization to work in the United States.

AFFIDAVIT AND RELEASE

1. I certify that my license is in good standing.
2. I understand that I must continue to pay the renewal fees for my inactive license.
3. I understand that I may not practice while my license is inactive, and that I must apply for and receive notification of my active license before resuming practice.
4. I understand that I must meet current renewal requirements and pay a reactivation fee to return my license to active status.
5. I understand that I am responsible to update the Division of any changes relating to my license.

Signature of Applicant: _____ Date: _____

The following items are required to complete your inactive request:

- ☐ $50.00 non-refundable application processing fee, made payable to "DOPL".
- ☐ Submit the license and wallet copy of the license you wish to make inactive

Submit the above items with your completed application to:

In person or via express delivery:
Division of Occupational and Professional Licensing
Heber M Wells Building, 1st Floor Lobby
160 E 300 S
Salt Lake City, UT 84111

US Postal Service:
Division of Occupational and Professional Licensing
PO BOX 146741
Salt Lake City, UT 84114-6741