



State Board of Opticians

Regular Mail: PO Box 6758 Raleigh, NC 27628-6758

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Phone: (919) 420-1390 Fax: (919) 420-1361

Inactive Status Application 2020 License Renewal

License Renewal Fee \$150.00

\$75.00 penalty applied to Applications & Renewals received after January 15, 2020 ***\$35.00 fee for returned checks***



EXPIRES JANUARY 1st ANNUALLY -- Licenses remaining expired for two or more years are not renewable. (NCGS § 90-244)

ALL SECTIONS BELOW MUST BE COMPLETED (please type or print clearly): [] Address Change ___ # of Duplicate Licenses

Name (First) (Middle) (Last) Sex Race License #

Home Address Telephone ()

City State Zip County

Email Address [] Permission to share email address

Do you certify to the Board that your employment is not in the optical business, so that you are not practicing opticianry anywhere in North Carolina? Are you retired - i.e., not working anywhere any longer?

Do you acknowledge your understanding that if found practicing opticianry, you will be required to restore the License to Active Status - i.e., attending a full complement of ConEd hours, paying any Late or unpaid Renewal fees, and a License Restoration fee; and that you will be subject to disciplinary action by the Board?

Do you acknowledge your understanding that should you decide to return to Active Status, you must apply to the Board for that Status change?

Attendance at CE hours is not required for Inactive Status licensees. Any Inactive licensee found in practice is subject to processes in 21 NCAC 40.0320 and Board disciplinary action.

**If you answer "Yes" to any of the questions below, you must provide a certified copy of the court records or a certified copy of applicable license or disciplinary records with a statement of explanation with this application.

Have you been charged, arrested, convicted, found guilty of, or pleaded nolo contendere to any criminal offense (excluding non-criminal traffic infractions)? Have you had an application for certificate or license denied or certificate or license suspended, cancelled, or revoked by any state or federal agency or governing or licensing board? Have you been investigated, charged, or disciplined; or are you currently under investigation by a governing or licensing board or by a state or federal agency? Have you been party to any civil suit, bankruptcy action, administrative proceeding, or binding arbitration; the basis of which is grounded upon an allegation of negligence, dishonesty, fraud, misrepresentation, or incompetence?

AFFIDAVIT OF APPLICANT

I have read General Statutes Chapter 90, Article 17 and Title 21, North Carolina Administrative Code, Chapter 40 and do understand the law and rules of the Board applicable to all dispensing opticians, particularly those about renewal, registration, advertising and supervision, and, the Continuing Professional Education requirements. As far as I am able to determine, I meet all of the requirements to apply for Inactive Status of an NC optician's license. I understand the contents of applications, including all attachments and disciplinary actions or consent orders regarding me, are subject to the NC Public Records Act. I understand that I am waiving any claim of confidentiality or privacy regarding disclosure of such public records. I authorize the Board to make such investigative inquiries it deems necessary and release from liability all parties responding to such inquiries. I affirm under the penalties of perjury that the information, statements, and any attachments made in conjunction with this application are true, correct, and complete.

I certify that I have read and understand the "public notice statement" maintained by the N.C. Industrial Commission, Employee Classification Section on their website. Further, I have ___/have not ___ been investigated for employee misclassification within the past twelve (12) months.

Signature

Date

Seal will be mailed after documentation is validated and Inactive Status is approved by Board -- seal must be displayed on license.