

REQUEST FOR LETTER OF CERTIFICATION FROM IDAHO

Name: _____ License Number/NPN: _____

I am requesting a Letter of Certification from the State of Idaho. Please send it to:

Email address: _____

In the event of any questions regarding this request, please call me.

Phone: _____

Please fax this completed form to **208-334-4398** or email to agent@doi.idaho.gov for processing.

Please contact us at this email address if you have any questions.