

**Request for Verification of Licensure to Another State or Entity**

The fee to verify a license is \$50.00, regardless of the number of verifications requested at the same time. Please complete a separate form for each verification you are ordering and mail with **\$50.00 (check or money order only)** to:

**ECPTOTE  
1801 Congress Ave Ste 10.900  
Austin, TX 78701**

**Type of License:** (*Check one.*)     OT     OTA     PT     PTA

\_\_\_\_\_  
**License Number**

\_\_\_\_\_  
**Expiration Date**

\_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Name at the time of Texas licensure, if different**

\_\_\_\_\_  
**Address**

\_\_\_\_\_  
**City**

**State**

**Zip**

**Phone #**

The Board will mail or email the verification. Select one option below and then complete the corresponding field(s).

**By Mail:**

\_\_\_\_\_  
**Board or Business/Entity**

\_\_\_\_\_  
**Address Line 1**

\_\_\_\_\_  
**Address Line 2**

\_\_\_\_\_  
**City**

**State**

**Zip**

**By Email:**

\_\_\_\_\_  
**Board or Business/Entity Email Address**