

Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 7082
Madison, WI 53707-7082
FAX #: (608) 267-0592
Phone #: (608) 266-2112

Office Location: 1400 E. Washington Avenue
Madison, WI 53703
E-Mail: DSPSCredTrades@wi.gov
Website: <http://dps.wi.gov>

DIVISION OF PROFESSIONAL CREDENTIALING PROCESSING

TRADES VERIFICATION REQUEST FORM

Please allow 7 - 10 business days for processing

Submit form with credit card information via fax to 608-267-0592 or
submit via form with check made payable to DSPS to the P.O. Box listed above.

CUSTOMER INFORMATION

Name of Credential Holder:

License/Customer ID #: Telephone Number: - -

Profession(s):

Entity/State Agency to Receive Verification:

Email Address of Entity/State Agency:

REQUIRED PAYMENT INFORMATION

Same as Customer Information Above

Name of Card Holder:

Cardholder's Telephone Number: - -

Cardholder's Address: (Street) (City) (State) (Zip Code)

Please Note: For all credit and debit card transactions, a 2% convenience fee will be assessed and will appear as a separate charge on your statement. This fee is non-refundable.

Total Amount to Charge: \$

\$10.00 fee per verification

Credit Card Number: - - -

Expiration Date: /



3-digit security code



4-digit security code

Security Code:

For Receiving Purposes

I understand by signing below, I authorize the State of Wisconsin Department of Safety and Professional Services to charge my credit card for the above amount and a 2% convenience fee assessed at the time of processing.

Cardholder's Signature:

DSPS uses RightFax to ensure safe and secure transmission of your payment information