



**Verification Order Form**

For a third party to obtain a hard copy verification of certification document directly from the CBDCE National Office (and not through the online system), there is a \$25 charge. Verification can be obtained online for active certificants at no charge using the CBDCE Online Verification System: [www.cbdce.org/verify](http://www.cbdce.org/verify).

To obtain directly from BCDCE National Office:

1. Complete Verification Order Form and submit, along with fee or credit card information.
2. Send the form to:

Attn: Verification, CBDCE, 330 East Algonquin Road, Suite 4, Arlington Heights, IL 60005 or fax: 847-228-8469.

Note: Due to the existence of viruses and other technological issues, verification requests cannot be submitted via email.

Please ensure all information is legible to avoid processing delays and allow up to 5 business days for processing after receipt.

**Requestor Information:**

Name: \_\_\_\_\_

Organization (required): \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Requesting Verification for Active Certificant or Individual with Expired Certification:**

Name: \_\_\_\_\_

Certification number or birthdate: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Individual's signature consenting release of verification information\*:

\_\_\_\_\_ Date: \_\_\_\_\_

\*Or include a signed "Consent to Release" form that is not more than one year old.

**Method for Sending Verification - check one only:**

Fax - Provide fax number and special instructions: \_\_\_\_\_

Mail - Provide full mailing address and any special instructions

\_\_\_\_\_

\_\_\_\_\_

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**Payment Information**

Order form fee is \$25 per verification request. Indicate payment method and required information below.

Check or Money Order ENCLOSED (personal, corporate or cashier's check or money order, payable to NCBDE)

Credit card - complete the following:

Check one:  VISA  MasterCard  American Express  Discover

Credit card mailing address, including city, state and zip code

Account Number

Expiration date

Security code

Name as it appears on card

Signature (credit card payments only) *By signing, I accept the charges for the verification requested.*

Date

Questions: Contact the CBDCE Office: P 847.228.9795 E [info@cbdce.org](mailto:info@cbdce.org)