

Kentucky Board of Dentistry 312 Whittington Pkwy, Suite 101 Louisville, Kentucky 40222 Phone: 502/429-7280 Fax: 502/429-7282 Email: kbd@ky.gov Website: http://dentistry.ky.gov

ACTIVE KENTUCKY DENTIST LIST ORDER FORM

PLEASE NOTE THE FOLLOWING INFORMATION:

- ALL files will be sent via email to the requestor
- List requests are NOT customized
- Allow 2 WEEKS from date received in the Board office for processing of your request
- Payment **MUST** be sent with this order form; make checks & money orders payable to *KY Board of Dentistry*
- Field names appear on the first row; standard available fields are on each list in the requested format

For Profit Organizations \$1,000 per list* Non-Profit Organizations

\$100 per list*

Non-Profit Only

I hereby certify that I am requesting this list of Kentucky licensee information for non-profit use only. I understand that any for-profit use of this list by myself or any customer or employee thereof will make me subject to paying the full fee. I also understand that I may be asked to provide documentation supporting non-profit use, and non-compliance will make me subject to paying the full fee. Signed,

Signature

Date

Printed name

Email list to:

Company/Attention to: _____

Email Address: _____

Phone number: ______

Revised 1/2013

For office use only

Date Received: ______ Payment: _____

Date Sent: