

Payment Information

Reinforced Concrete Special Inspector Education/Work Experience Evaluation

Personal Data - Please print clearly

Date _____

Name _____

Street _____

City _____ State _____ Zip _____

Country _____

Phone _____ FAX _____

Method of payment - Select one and provide all info; checks must be in U.S. funds, drawn on a U.S. Bank.
Checks are to be made payable to "ACI"

' Personal Check ' Cashier's Check No. _____

' Visa ' MasterCard Account No. _____

Credit Card Expiration Date _____

Return this sheet with your completed Education/Work Experience forms and copies of your transcript(s)/diploma(s) by traceable mail (certified, registered, UPS, etc.) to the **ACI Certification Department, ATTN: Exam Processing, 38800 Country Club Drive, Farmington Hills, Michigan, 48331, (248) 848-3790**