



Dental Board of California

2005 Evergreen Street, Suite 1550, Sacramento, California 95815
P (916) 263-2300 | F (916) 274-5970 | www.dbc.ca.gov



ORAL & MAXILLOFACIAL
SURGERY PERMIT APPLICATION

Business & Professions Code 1638-1683.5

NON-REFUNDABLE FILING FEES

Application Fee: \$500

Fingerprint Fee: \$49 (If fingerprint cards are submitted)

Office Use Only
Receipt No. File#
Fee Paid Initials
OMS Permit # Issued
Exp. Date

Form with fields: Full Name (Last, First, Middle), SSN, Address of Record, Birthdate, Telephone Number, Email Address, California Medical License #, Date Issued, Has Discipline been taken against this license?, Dental License Number, State(s) of Issuance, Has discipline been taken against license(s) or has license been surrendered with disciplinary charges pending?, Certification statement, Applicant Signature, Date.

Note: See OMS Information for documents required to be submitted with this application.

INFORMATION COLLECTION AND ACCESS

The information requested herein is mandatory and is maintained by Dental Board of California, 2005 Evergreen Street, Suite 1550 Sacramento, CA 95815, Executive Officer, 916-263-2300, in accordance with Business & Professions Code, §1600 et seq. Except for Social Security numbers, the information requested will be used to determine eligibility. Failure to provide all or any part of the requested information will result in the rejection of the application as incomplete. Disclosure of your Social Security number is mandatory and collection is authorized by §30 of the Business & Professions Code and Pub. L 94-455 (42 U.S.C.A. 405(c)(2)(C)). Your Social Security number will be used exclusively for tax enforcement purposes, for compliance with any judgment or order for family support in accordance with Section 17520 of the Family Code, or for verification of licensure or examination status by a licensing or examination board, and where licensing is reciprocal with the requesting state. If you fail to disclose your Social Security number, you may be reported to the Franchise Tax Board and be assessed a penalty of \$100. Each individual has the right to review the personal information maintained by the agency unless the records are exempt from disclosure. Applicants are advised that the names(s) and address(es) submitted may, under limited circumstances, be made public.