

**County of Los Angeles Department of Public Works  
REPORT OF CHANGES IN CERTIFICATION LISTS**

Submit to: 900 South Fremont Avenue, Lobby Floor, Attn: Exams Unit, Alhambra, CA 91803  
OR, Fax to: (626) 979-5440, Attn: Exams Unit

Exam Title \_\_\_\_\_ Exam No. \_\_\_\_\_

Name \_\_\_\_\_  
Last First MI Social Security No.

New  
Name \_\_\_\_\_  
Last First MI

New Address \_\_\_\_\_ New Work Phone \_\_\_\_\_  
Number Street Apt.

City State Zip Code  
New Home Phone \_\_\_\_\_

Date Call Received \_\_\_\_\_ Submitted by \_\_\_\_\_  
Signature Date

Remarks \_\_\_\_\_  
\_\_\_\_\_