

**INSTRUCTIONS FOR FILING THE APPLICATION FOR CERTIFICATE OF
AUTHORITY (Firm License)**

TO AVOID IMPROPER FILING, PLEASE READ CAREFULLY.

There are six sections on the three page application form.

Page one: All parts of sections 1. and 2. MUST be completed. For the FEI#, you may use the Architect of Record's Social Security # if the Federal Tax ID # is pending and inform the Board in writing when it is established.

Section 1: The LEGAL name of the entity should be the same as the name on the original certificate of authority. If it is different, please explain. The Secretary of State has declared that numbers 0-10 numeric or written are non-descriptive and may not be used in the entity title. The address and telephone number should be the address and telephone number of the office.

Section 2: Fill in the name, the Oklahoma license number and check the **legal position** in the entity of the architect of record.

Page two: All parts of this page MUST be completed. The architect of record's signature(s) is required and if there are any other partners, directors, officers, shareholders, managers, members or principals in the firm, at least one of them must sign the Attest portion of this page. The signature and seal of a notary is also required. If you have more than one "Architect of Record", an additional copy of page two must be completed, signed and notarized for each "Architect of Record".

Page three: Sections 3. through 4. must be completed if they apply to your firm. Write N/A in the sections that do not apply.

Section 5: List the main office (office on original certificate of authority) and all branch offices of the firm. An office that is not involved in architectural practice in Oklahoma should be listed with the statement "Does not practice in Oklahoma."

Nothing is required for section six.

Send the completed Certificate of Authority application and a check for the application fee in the amount of \$325.00 check, payable to "Oklahoma Board of Architects". Fees are not prorated.

*IMPORTANT: If your firm is a corporation, limited partnership, LLC OR LLP, please read the special instructions on page 2 of the instructions.

Your application will be acted on by the Board at the next regular meeting and the Board will mail a certificate for the Certificate of Authority to your business address when it is approved.

The law requires the "Architect of Record" to notify the Board in writing, within thirty (30) days, of all changes to the original application. The Certificate of authority (firm license) will begin on date approved by the Board and expire on June 30, 2013. Renewals will be sent to the "Architect(s) of Record" at the business address.

**SPECIAL INSTRUCTIONS FOR CORPORATIONS,
LIMITED PARTNERSHIPS, LLC AND LLP**

- * Contact the Oklahoma Secretary of State, State Capitol, Oklahoma City, Oklahoma 73105 or call 405-521-3911 for all forms to domesticate or qualify your entity for Oklahoma.
- * Complete all forms received from the Secretary of State.

Upon approval by the Board, corporation, limited partnerships, LLC and LLP shall file all original domestication or certificate of qualification, fees and the Board letter of approval with the Oklahoma Secretary of State.

Consult the State Architectural and Registered Interior Designers Act, Section 46.9 for architects and Section 46.32 for landscape architects and the Oklahoma Administrative Code 55:10 Subchapter thirteen (13) Organizational Practice for further information or contact the Board office.

BOARD OF GOVERNORS OF THE LICENSED ARCHITECTS, LANDSCAPE
ARCHITECTS AND REGISTERED INTERIOR DESIGNERS OF OKLAHOMA
P.O. Box 53430
Oklahoma City, OK 73152
405-949-2383 (phone) 405-949-1690 (fax)

APPLICATION FOR CERTIFICATE OF AUTHORITY

Refer to the Oklahoma Administrative Code 55:10 Subchapter 13 (All information must be typewritten)

CA NUMBER _____ (Leave Blank)

GENERAL INFORMATION

Legal Name of Entity: _____
(Exactly as you want it filed with the Secretary of State)

Business Address: _____
City _____ State _____ Zip _____

Business Phone _____ (Include Area Code)

Number:

Business Fax Number: _____ (Include Area Code)

No. of offices: _____ **Federal Tax I D #** _____

Type Of Entity:

_____ LLC, LLP, PLLC, PLLP: Manager or Member

_____ Partnership: Partner

_____ Limited Partnership: General Partner

_____ Corporation, Sole Proprietorship: Director, Officer, Shareholder, Principal

_____ Association: Corporation, LLC, LLP, Individuals

_____ Joint Venture: Two of the above

2. NAME _____ OK License No. _____

Check legal position in the entity of the architect(s) of record

General Partner _____ Director _____ Sole Proprietor _____

Partner _____ Officer _____ Shareholder _____ Manager _____

Member _____ Principal _____

NAME _____ OK License No. _____

General Partner _____ Director _____ Partner _____ Officer _____

Shareholder _____ Manager _____ Member _____ Principal _____

NAME _____ OK License No. _____

General Partner _____ Director _____ Partner _____ Officer _____

Shareholder _____ Manager _____ Member _____ Principal _____

(add additional page if more space is needed)

PLEASE COPY THIS PAGE FOR EACH ARCHITECT OF RECORD

AFFIDAVIT:

I, being duly sworn, state that I am a licensed _____ in the State of Oklahoma, in good standing with the Board of Governors of the Licensed Architects, Landscape Architects and Registered Interior Designers of Oklahoma and that I consent to be responsible for all of the activities and decisions in the State of Oklahoma for the above named entity as same relates to the practice of ___Architecture ___Landscape Architecture (check applicable practice) in this state on a _____full or _____part time basis. The normal office hours of the firm are _____am to _____pm and open _____ through _____ (days of the week).

I understand that I am REQUIRED to sign, date and stamp all documents issued for the firm and all work is under my direct supervision as defined by OAC 55:10-1-3,p2. Further, I hereby certify I have received, read and understand the State Architectural and Registered Interior Designers Act and the Board's current Rules and Regulations as it applies to the requirements and responsibilities of and for this entity concerning the Certificate of Authority.

I hereby certify _____, acting on

(Type name of architect or landscape architect of Record)

behalf of the entity by filing this application is doing so with full legal authority to act in the entity's behalf.

IN WITNESS WHEREOF, the entity has caused its name to be here unto Affixed by _____ and

(signature of architect or landscape architect of record)

Attested this _____ day of _____, 20 _____.

ATTEST:

(Attesting Signature)

(Type name of attesting signature)

(Attesting Signature)

(Type name of attesting signature)

Subscribed and sworn to before me this _____ day of _____, 20 _____.

(Signature of Notary Public)

My commission expires _____.

3. NAMES IN FIRM TITLE

List below ALL names in firm title, their license number, type of license, state of registration, indicate status (active, inactive, retired or deceased) and the year if inactive, retired or deceased. _____

4. PARTNERS/DIRECTORS/OFFICERS/MEMBERS/MANAGERS/PRINCIPLES OR OTHER EMPLOYEES:

List below the name, title and address of ALL personnel which act in its behalf IN OKLAHOMA as architects or landscape architects in the capacity as partners, directors, officers, members, managers, principals or employees of the entity. Indicate ALL titles of persons, the type of Oklahoma license held and the license number.

5. LIST ALL OFFICES OF THE FIRM BELOW: List office addresses. If none state "not applicable". _____

6. DISCLAIMER

The Board of Governors of the Licensed Architects, Landscape Architects and Registered Interior Designers of Oklahoma, by approving and issuing a Certificate of Authority to an entity, disclaims that an entity is lawfully or legally formed under the statutes of the State of Oklahoma.