

**OKLAHOMA ACCOUNTANCY BOARD (OAB)**  
**201 NW 63<sup>rd</sup> Street, Ste. 210**  
**Oklahoma City OK**  
**(405) 521-2397**

**APPLICATION TO USE A TRADE NAME (D/B/A)**  
**NO FEE REQUIRED**

1. Practice Name: \_\_\_\_\_
2. Your Name: \_\_\_\_\_
3. CPA Certificate No. or PA License No. \_\_\_\_\_
4. Office Mailing Address: \_\_\_\_\_
5. Name of Designated Manager: \_\_\_\_\_
6. Office Telephone No. (\_\_\_\_) \_\_\_\_\_ FAX No.(\_\_\_\_) \_\_\_\_\_
7. E-mail Address (optional): \_\_\_\_\_

**Changes of professional status or mailing address which occur subsequent to registration MUST be reported to the Oklahoma Accountancy Board within 30 days of the change.**

1. **Answer “Yes” or “No” to each with respect to the legal structure of the firm:**  
 Sole Proprietor \_\_\_\_\_ Partnership \_\_\_\_\_ LP \_\_\_\_\_ LLP \_\_\_\_\_ PLLC \_\_\_\_\_  
 Professional Corporation \_\_\_\_\_ Business Corporation \_\_\_\_\_ License Agreement \_\_\_\_\_  
 Franchise \_\_\_\_\_
2. **Indicate all types of services which are performed through the practice:**  
 Audits \_\_\_\_\_ Reviews \_\_\_\_\_ Compilations \_\_\_\_\_ Attest Services \_\_\_\_\_  
 Investment Counseling \_\_\_\_\_ Tax Planning Services \_\_\_\_\_ Tax Returns \_\_\_\_\_  
 Financial Planning Services \_\_\_\_\_ Management Advisory Services \_\_\_\_\_  
 Other \_\_\_\_\_
3. **Do you perform governmental audits for Oklahoma entities?** \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If yes, have you filed the Registration Form for Independent Auditors  
 Engaged in Audits of Governmental Entities as required? \_\_\_\_\_ Yes \_\_\_\_\_ No
4. **Have you had a system or engagement peer review?** \_\_\_\_\_ Yes\* \_\_\_\_\_ No\*\*
5. If **“Yes”** to Question 21, provide the date of the peer review year end of the most recent peer review submitted to the OAB: \_\_\_\_\_ Attach the applicable peer review documents as required if not previously provided to the OAB.  
 If **“No”** to Question 21, provide the engagement date of the first audit or review engagement performed after June 30, 2004: \_\_\_\_\_ If applicable, attach the *peer review enrollment confirmation* form indicating proof of enrollment in a Board approved Sponsoring Organization’s peer review program.

Pass Reports	Pass With Deficiencies or Fail Reports
<input type="checkbox"/> Peer Review Report <input type="checkbox"/> Final Letter of Acceptance from the Sponsoring Organization	<input type="checkbox"/> Peer Review Report <input type="checkbox"/> Letter of Comments <input type="checkbox"/> Letter of Response <input type="checkbox"/> Signed Agreement to the Conditional Letter of Acceptance <input type="checkbox"/> Final Letter of Acceptance from the Sponsoring Organization <input type="checkbox"/> \$100 Peer Review Report Fee
Peer Review Enrollment Confirmation	
<input type="checkbox"/> Confirmation from approved Sponsoring Organization showing proof of enrollment in a peer review program. Enrollment is required within one year of the first audit or review engagement performed after June 30, 2004.	

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6. **Does every CPA and PA on your staff, who practices in Oklahoma or serves Oklahoma clients hold a valid Oklahoma permit to practice or practice through substantial equivalency?**  
\_\_\_ Yes \_\_\_ No. If "No", please attach an explanation.

I understand that the individual or firm registration and permit must remain in good standing to use a d/b/a as the business name. I understand the d/b/a name can not be changed without approval from the OAB. I certify that the information I have provided true and correct. I have not omitted or suppressed any information which would have any bearing on the renewal.

\_\_\_\_\_  
Original Signature

\_\_\_\_\_  
Date Signed

( ) \_\_\_\_\_  
Office Telephone Number

\_\_\_\_\_  
Email Address (Optional)

*Please be aware that most information provided to the OAB is considered an open record and may be released, except where such release is specifically prohibited by the Oklahoma Accountancy Act, the Oklahoma Open Records Act, or the Federal Privacy Act (i.e., social security numbers, transcripts, examination grades, etc.).*

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**FOR BOARD USE ONLY**

Registration Approved By: \_\_\_\_\_ Date Approved: \_\_\_\_\_

Disapproved By: \_\_\_\_\_ Date: \_\_\_\_\_

Copy Mailed to Registrant By: \_\_\_\_\_ Date: \_\_\_\_\_

Added to List By: \_\_\_\_\_ Date: \_\_\_\_\_

Original in Trade Name File By: \_\_\_\_\_ Date: \_\_\_\_\_

Database Noted By: \_\_\_\_\_ Date: \_\_\_\_\_

Copy in Individual File By: \_\_\_\_\_ Date: \_\_\_\_\_

## INSTRUCTIONS FOR APPLICATION TO USE TRADE NAME

1. **The trade name registration procedure is only available to registrants who practice as sole proprietors and only one trade name registration is allowed.** If you practice as a partnership or professional corporation you cannot use this form and should request the appropriate firm registration from the Board.
2. **You may not hold out or practice in the trade name until you have received approval from the Board.** A copy of this form indicating Board action on the request will be returned to you.
3. A trade name (d/b/a) must comply with [10:15-39-8\(2\)](#) of the Oklahoma Administrative Code. Only one fictitious name is permitted. Two or more entities cannot use the same name, so the registrant who first registers the name with the Board will have the exclusive right to use the name until revoked.
4. If the sole proprietor includes the name of the franchisor or licensor in the fictitious practice name submitted to the Board, the practice name must include the registrant's last name with the name of the franchisor or licensor (for example, "Smith's [name of franchise]"). A franchise or license cannot be registered.
5. There is no fee for registering a practice trade name with the Board.
6. No separate permit to practice will be issued by the Board. Following registration of the trade name with the Board, the trade name should be listed on the individual biennial registration form filed with the Board to renew the CPA certificate or PA license.

### **PLEASE NOTE: USE OF THE SINGULAR PROFESSIONAL DESIGNATION IS REQUIRED WHENEVER THE TRADE NAME IS USED**

Sole proprietors are permitted to use only the singular professional designation on printed materials and signs associated with the practice. Even though you may have certified staff members, the single owner status of the practice requires that the singular designation be used.