BOARD FOR ARCHITECTS, PROFESSIONAL ENGINEERS, LAND SURVEYORS, CERTIFIED INTERIOR DESIGNERS AND LANDSCAPE ARCHITECTS

Business Entity Information Sheet

Under no circumstances is a business authorized to render professional services in Virginia until it has registered with the Virginia State Corporation Commission (if required), and obtained a certificate of authority from the Board for Architects, Professional Engineers, Land Surveyors, Certified Interior Designers and Landscape Architects. The certificate of authority issued by the Virginia Board permits a business to practice only the professions shown on the certificate of authority. The Virginia SCC may be contacted at:

Virginia State Corporation Commission
PO Box 1197
Richmond, VA 23218
Phone: (804) 371-9967
TDD: (804) 371-9206

If professional services are offered or rendered in a branch office, a separate Business Entity Branch Office Registration Application must be completed for each branch office. At least one currently licensed or certified responsible person (as defined by regulation 18VAC10-20-10) in each profession offered or practiced in each branch office must be resident at the branch to provide effective supervision and control of the final professional product.

Applications for business entity registration must include the following:

- **Partnerships** must include a copy of the partnership agreement that shall include a statement that all professional services of the partnership shall be under the direct control and personal supervision of a licensed or certified professional.
- **Limited partnerships** must include a copy of the partnership agreement that shall include a statement that all professional services of the partnership shall be under the direct control and personal supervision of a licensed or certified professional; and a copy of the certificate of limited partnership issued by the Virginia State Corporation Commission. If a foreign limited partnership, a copy of the certificate of registration of the foreign limited partnership issued by the Virginia State Corporation Commission shall be required in lieu of the certificate of limited partnership.
- **Corporations** must include copies of the certificate of incorporation issued by the Virginia State Corporation Commission, articles of incorporation, bylaws and charter. If a foreign corporation, a copy of the certificate of authority issued by the Virginia State Corporation Commission shall be required in lieu of the certificate of incorporation. Foreign corporations must also submit copies of the articles of incorporation, bylaws and charter.
- **Limited liability companies** must include a copy of the certificate of organization issued by the Virginia State Corporation Commission, or if a foreign limited liability company, a copy of the certificate of authority issued by the Virginia State Corporation Commission.

Any changes of status, including but not limited to changes in entity, name (including assumed names), address, place of business or responsible person(s) shall be reported to the Board in accordance with Board regulation 18VAC10-20-660.
Commonwealth of Virginia  
Department of Professional and Occupational Regulation  
9960 Mayland Drive, Suite 400  
Richmond, VA 23233  
(804) 367-8506  
www.dpor.virginia.gov

Board for Architects, Professional Engineers, Land Surveyors, Certified Interior Designers and Landscape Architects  
BUSINESS ENTITY REGISTRATION APPLICATION

A check or money order payable to the TREASURER OF VIRGINIA, or a completed credit card insert available at http://www.dpor.virginia.gov/dporweb/forms/fin/creditcard.pdf must be mailed with your application package.  
APPLICATION FEES ARE NOT REFUNDABLE.

All applicants are required to read and understand the Board for Architects, Professional Engineers, Land Surveyors, Certified Interior Designers and Landscape Architects Regulations available at www.dpor.virginia.gov prior to applying for registration.

Please use black or blue ink when completing this application.

Select the type of action you are requesting on this application.

<table>
<thead>
<tr>
<th>Type of Action</th>
<th>VA Registration No.</th>
<th>Trans</th>
<th>Fee</th>
<th>X</th>
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<td></td>
<td>1020</td>
<td>$100.00</td>
<td></td>
</tr>
<tr>
<td>Change of status</td>
<td>0407</td>
<td></td>
<td>No Fee</td>
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</tbody>
</table>

Is the firm authorized (in accordance with the laws of the Commonwealth of Virginia) to conduct business in Virginia?

Yes [ ] Please refer to the information sheet for required documentation to be submitted with the application.

No [ ] If no, this application cannot be processed.

1. Name of Business Entity ____________________________________________

2. Trade or Fictitious Name  
   If a Trade or Fictitious Name is to be used, a copy of the certificate filed with the State Corporation Commission or locality pursuant to § 59.1-69 of the Code of Virginia must be included with this application.

3. Federal Employer Identification No. □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ │

4. Street Address (PO Box not accepted)  
   City, State, Zip Code ____________________________________________

5. Mailing Address (PO Box accepted)  
   City, State, Zip Code ____________________________________________

6. E-mail Address ____________________________________________

7. Contact Numbers   Telephone __________________ Facsimile __________________

8. Type of business (select only one)  
   □ Sole Proprietorship (that employs more than one licensee)  
   □ Partnership  
   □ Limited Liability Company – if the business is a Professional LLC, a different application is required  
   □ Corporation – if the business is a Professional Corporation, a different application is required  
   □ Other

FOR OFFICE USE ONLY

<table>
<thead>
<tr>
<th>DATE</th>
<th>FEE</th>
<th>TRANS CODE</th>
<th>ENTITY #</th>
<th>APPLICATION #</th>
<th>FILE# / LICENSE #</th>
<th>ISSUE DATE</th>
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</table>
9. Profession(s) to be practiced by the business entity and Virginia-licensed individual(s) in responsible charge. At least one full-time employee or resident principal licensed or certified in each profession offered or practiced must be resident at this business location to provide effective supervision and control of the final professional product.

<table>
<thead>
<tr>
<th>Select all that apply</th>
<th>Name/Title of Individual Resident &amp; in Responsible Charge</th>
<th>VA License No.</th>
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<tbody>
<tr>
<td>Architects</td>
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<tr>
<td>Professional Engineers</td>
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<tr>
<td>Land Surveyors</td>
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<tr>
<td>Surveyor Photogrammetrists</td>
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<td>0408</td>
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<tr>
<td>Landscape Architects</td>
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<td>0406</td>
</tr>
<tr>
<td>Interior Designers</td>
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<td>0412</td>
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10. Are you applying for a Change of Status for a business entity that is already registered with the Virginia Board?

- No
- Yes If yes, please list all current and new individuals in responsible charge. Note: the business entity record will be updated to reflect only the individuals listed on this application. All professionals affiliated with this location must comply with regulation 18VAC10-20-780.

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>VA License No.</th>
<th>Profession</th>
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11. Has the business ever been subject to a disciplinary action imposed by any (including Virginia) local, state or national regulatory body?

- No
- Yes If yes, please provide a certified copy of the final order, decree or case decision by a court or regulatory agency with lawful authority to issue such order, decree or case decision.

12. Has the business ever been convicted in any jurisdiction of any felony or misdemeanor? Any guilty plea or plea of nolo contendere must be disclosed on this application.

- No
- Yes If yes, list the felony and/or misdemeanor conviction(s). Attach the original criminal history record and any other information you wish to have considered with this application (i.e., information on the status of incarceration, parole or probation; reference letters; documents of rehabilitation; etc.). If necessary, you may attach a separate sheet of paper.

Certified copies of court records may be obtained by writing to the Clerk of the Court in the jurisdiction in which convicted. The address is available from your local police department.

Original criminal history records may be obtained by contacting the state police in the jurisdiction in which convicted. Virginia residents must complete a criminal history record request form in the presence of a notary public and mail it to the Department of State Police, Central Criminal Records Exchange, PO Box 27472, Richmond, VA 23261-7472.
13. Signatures of individuals listed in #9.
I, the undersigned, certify that the foregoing statements and answers are true, and I have not suppressed any information that might affect the Board's decision to approve this application. I certify that I am in responsible charge of the professions practiced by the business. I also certify that I will comply with all relevant statutes including Chapter 4 of Title 54.1 of the Code of Virginia, and the Virginia Board for Architects, Professional Engineers, Land Surveyors, Certified Interior Designers and Landscape Architects Regulations.

Signature
Date

Signature
Date

Signature
Date

Signature
Date

Signature
Date

14. Signature of Authorized Official
I, the undersigned, certify that the foregoing statements and answers are true, and I have not suppressed any information that might affect the Board's decision to approve this application. I certify that the professions indicated on page 1 of this form will be under the direct control and personal supervision of the licensed or certified full-time employees identified in this application. I also certify that the business will comply with all relevant statutes including Chapter 4 of Title 54.1 of the Code of Virginia, and the Virginia Board for Architects, Professional Engineers, Land Surveyors, Certified Interior Designers and Landscape Architects Regulations.

Signature
Date

Title

Notarization
In the State of ______________, City/County of ______________, subscribed and sworn before me, the undersigned Notary Public in and for the City/County aforesaid this ________ day of __________, 20____.
My commission expires the ________ day of __________, 20____.

Affix official seal here.

Signature of Notary Public

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