



ALABAMA BOARD OF ARCHITECTS
 770 Washington Avenue, #150
 Montgomery, AL 36130-4450
 Phone: (334) 242-4179
<http://www.boa.alabama.gov>

**Application for a Certificate of Authorization (COA) to Practice
 Architecture in the State of Alabama - FEE \$25.00 -**

- Corporations, professional associations, partnerships, and limited liability companies are eligible to receive a Certificate of Authorization to Practice Architecture in Alabama.
- A firm required to be qualified by the Alabama Secretary of State's Office (SOS) to do business in Alabama may file such qualification documents with the SOS Office concurrently with this application. Please visit <http://www.sos.alabama.gov> or call (334) 242-5324. A copy of the submitted SOS documents, showing the date submitted, should be attached to this application. The firm entity name on the application must be the same as the firm entity name filed on the SOS documents.
- Two-thirds (2/3) or more of the officers, partners, directors, members, or others (depending on the legal structure of the entity) must be registered/licensed architects and/or licensed engineers in any United States jurisdiction **and must also be voting stockholders/shareholders of the entity.**
- At least one (1) of the **stockholding/shareholding** officers, partners, directors, or members **must be an architect registered in the State of Alabama**, who has authority to contractually bind the entity and whose name and registration seal shall appear on all documents prepared under his/her responsible control.
- If the firm is dissolved or reorganized, or if there is a change in the address, email, or in the registered architect(s) in responsible control of the practice of architecture in Alabama, the entity **must notify the Board in writing within thirty (30) days.**
- Please refer to Alabama Board of Architects regulations found in chapter 100-X-8 for more in-depth information.

CERTIFICATES OF AUTHORIZATION EXPIRE EACH YEAR ON APRIL 30. RENEWAL INFORMATION WILL BE TRANSMITTED AT THE BEGINNING OF APRIL TO THE EMAIL AND/OR ADDRESS WE HAVE ON FILE FOR THE FIRM.

Please fill out the following information completely and return it with your check payable to Alabama Board of Architects to the address listed above.

1. Contact Information

| | | |
|---------------------|--|---------------------------|
| Name of Firm Entity | | Date |
| Contact Person | | |
| Mailing Address | | |
| Phone Number | | Email for Contact Person: |

2. List the firm officers, partners, directors, members, or others (depending on the legal structure of the entity). Attach a separate sheet if necessary. **AT LEAST ONE MUST BE AN ACTIVE ALABAMA REGISTERED ARCHITECT WHO IS A VOTING STOCKHOLDER/SHAREHOLDER OF THE ENTITY.**

| Name | Position in Firm | Address | Profession | Home State of Regis. | AL Regis. No. or N/A |
|------|------------------|---------|------------|----------------------|----------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

