

ALABAMA BOARD FOR REGISTRATION OF ARCHITECTS
770 WASHINGTON AVENUE, SUITE 150
MONTGOMERY, AL 36130-4450 (Overnight Mail Zip-36104)
(334) 242-4179
HTTP://WWW.BOA.ALABAMA.GOV

FOR BOARD USE ONLY:

Date	Receipt Number	Amount
------	----------------	--------

ARCHITECT REGISTRATION RENEWAL NOTICE
OCTOBER 1, 2009 TO SEPTEMBER 30, 2010

TYPE ARCHITECT NAME, FIRM NAME, AND FULL ADDRESS:

NAME:
FIRM NAME:
ADDRESS:
CITY, STATE, ZIP CODE

ALABAMA REG. NO: _____
SOCIAL SECURITY NO: (REQUIRED) _____
PHONE NUMBER: _____
E-MAIL ADDRESS: _____

In order to continue your architect registration in the state of Alabama, you must complete both pages; sign, date, and return them with your check for renewal **NO LATER THAN SEPTEMBER 30, 2009** to avoid the late penalty. **Please do not submit your renewal form without a check unless you are an Emeritus Architect.**

ARCHITECT RENEWAL FEES

Renewal Fees for Alabama-registered architects are as follows:

Architects	\$135.00 (MAKE <u>ALL</u> CHECKS PAYABLE TO: ALABAMA BOARD OF ARCHITECTS)
Late Penalty	\$ 75.00 (postmarked after 9/30/09)
Emeritus Architect	\$ 0.00

MARK STATEMENTS WITH AN "X" ON ALL THAT APPLY:

- _____ I certify and affirm that I have read and understand the Registration Laws of Alabama and that I have complied with the Continuing Education requirements for the period preceding this renewal.
- _____ I am exempt from continuing education requirements for the following reason:
____ Emeritus Architect ____ First-Time Registrant ____ Personal Hardship (approval letter attached)
- _____ I certify and affirm that I have participated in the continuing education activities listed on page 2, which are true and accurate records of CEHs earned during the period from October 1, 2008 to September 30, 2009 (or through date of submittal).
- _____ I certify and affirm that in lieu of the above, I have met the current continuing education requirements of **my RESIDENT STATE** for my current registration in that state. **Please attach a copy of your wallet card, letter of good standing, or certificate if you reside in one of the following states:** (AK, AR, ID, IA, KS, KY, LA, MA, MN, MS, MO, NE, NM, NC, OH, OK, OR, RI, SC, SD, TN, TX, VT, WV, WY)

Jurisdiction: _____ Registration Number: _____

ANSWER ALL THREE QUESTIONS BELOW:

CERTIFICATION:

- Yes No Have you been charged, arrested, convicted, found guilty or pleaded "nolo contendere" to any criminal offense since the filing of your last renewal application (excluding misdemeanor traffic infractions)? If YES, submit details.
- Yes No Have you been investigated, charged, or disciplined since the filing of your last renewal application? If YES, submit details.
- Yes No Are you currently under investigation by a governing or licensing board or by a state or federal agency? If YES, submit details.

Signature: _____ Date: _____

