

Instructions for a New Firm Certificate of Authorization or Change of Firm Name

Each application must include:

- Notarized application.
- Application must include a copy of the Secretary of State registration, which is available online at: <http://www.sos.state.oh.us/SOS/Businesses.aspx>, by phone at (614) 466-3910, or toll-free (877) 767-3453.
- Notarized Affidavits of Responsibility for each Ohio designated architect and/or Ohio landscape architect.
- **The application fee is \$125.00 for each profession; firms offering both architecture and landscape architecture services must pay \$250.00.**
- Make check or money order, U.S. dollars only, payable to: “**Treasurer, State of Ohio**”.
- Mail check and application to: Ohio Architects Board, 77 S. High St., 16th Floor, Columbus, OH 43215-6108.

Important Information:

- Applications without the correct fee or with incomplete information will be returned.
- All Certificates of Authorization expire annually on June 30.
- The certificate will be emailed to the firm and must be displayed for public viewing.
- Firms are responsible for notifying the board within 30 days of any changes in the firm’s name, address, partners, managers, officers, members, directors, shareholders, designated architects/landscape architects, or re-distribution of ownership.
- 100% of shares or interest for all owners must be reported, along with design discipline, state and expiration date for all applicable design professional owners.

Firms must meet all of these requirements in order to obtain the Certificate of Authorization:

Note: *Certain architecture firms are exempt from items 1, 2 and 3: Firms which were actively registered with the Ohio Secretary of State and granted a charter to do business in the state of Ohio prior to August 7, 1943 or otherwise lawfully providing architectural services prior to November 15, 1982. These firms are still required to obtain a Firm Certificate of Authorization.*

- More than 50% of the shareholders, members, trustees or partners must be design professionals (architects, landscape architects, engineers, or surveyors) with an active registration in any state. (For example, if ten individuals hold all of the stock or interest in the firm, then six must be registered design professionals.)
- More than 50% of the shares or interests in the corporation, partnership, limited liability company, trust or association must be owned by design professionals with an active registration in any state.
- More than 50% of the firm's board of directors (in a corporation) must be active registered design professionals in any state.
- At least one architect/landscape architect with an active Ohio registration is in responsible charge of the professional activities and decisions of the firm.
- At least one architect with an active Ohio registration, designated in responsible charge of the professional activities and decisions of the firm, is also a member of the firm’s Board of Directors.
- The firm must hold an active registration to do business in the state of Ohio with the Ohio Secretary of State, Business Services Division at: <http://www.sos.state.oh.us/SOS/Businesses.aspx> by phone (614) 466-3910, or toll-free (877) 767-3453.

For questions or assistance, contact:

Chad Holland

Phone: (614) 466-1476

Email: chad.holland@arc.ohio.gov



Ohio Architects Board Ohio Landscape Architects Board

77 South High Street, 16th Floor Columbus, Ohio 43215-6108 (614) 466-2316

Application for a New Firm Certificate of Authorization or Change of Address

This firm is registered with the Ohio Secretary of State as a:

<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Liability Co	<input type="checkbox"/> Partnership	<input type="checkbox"/> Prof. Assoc.
Secretary of State Entity # (click here to look up) _____			

This firm provides the following services in the State of Ohio:

<input type="checkbox"/> Architecture (\$125)	<input type="checkbox"/> Landscape Architecture (\$125)	<input type="checkbox"/> Architecture and Landscape Architecture (\$250)
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Contact Information:

Firm Name/DBA		Firm Certificate # (if change of name)		Contact Person	
Principal office street address			Contact Email		
City		State	Zip Code	County, if Ohio	
Mailing Address (if different from above)			Phone		Fax

List ALL Shareholders, Members, Partners, Managers, Directors, Officers & Trustees (Use additional sheets if needed.)

Name		Design Discipline / Registration No. / State / Exp. Date		# of Shares Held	
Principal Office Address					% Ownership
Telephone	Fax		Email		

Name		Design Discipline / Registration No. / State / Exp. Date		# of Shares Held	
Principal Office Address					% Ownership
Telephone	Fax		Email		

Name		Design Discipline / Registration No. / State / Exp. Date		# of Shares Held	
Principal Office Address					% Ownership
Telephone	Fax		Email		

Board Use Only		Check No.	Rec'd Date
Reviewed by/Initials		Approved by/date	Issue Date

List the firm's Ohio designated responsible architects or landscape architects (Use additional sheets if needed):

Name	Ohio Registration No./Expiration Date	# of Shares Held
Principal Office Address		% Ownership
Telephone	Fax	Email

Name	Ohio Registration No./Expiration Date	# of Shares Held
Principal Office Address		% Ownership
Telephone	Fax	Email

AFFIDAVIT OF RESPONSIBILITY

(Complete one for each Ohio designated responsible architect and/or landscape architect)

State of _____

County of _____

I, _____, the undersigned affiant, under oath, being duly sworn, swear
Print Name

I am a ____ registered architect or ____ landscape architect in the State of Ohio, _____
Ohio License #/ Expiration Date

issued by the Ohio Architects Board/Ohio Landscape Architects Board and that I am a

designee of _____ and I accept the full responsibility for the professional
Firm Name

activities and decisions of this firm and meet the requirements under law for this designation.

Signature of Affiant

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

Witness my hand and seal hereto attached –

Notary Public

Notary Seal/Stamp

My commission expires _____, _____.