



# The State of North Carolina

The North Carolina Board of Architecture  
127 W. Hargett Street Suite 304  
Raleigh, NC 27601

Phone: 919.733.9544

ncba@ncbarch.org

www.ncbarch.org

## Application for Architect License Registration by Reciprocity      Fee: \$150.00

Information and Instructions to all Individuals Applying for License Registration by Reciprocity (You must have a valid NCARB Certification to use this form.)

- Return completed form to the North Carolina Board of Architecture at the address above with the application fee of \$150.00. Make the check payable to NCBA.
- Do not send this form to the National Council of Architecture Registration Boards (NCARB). Contact NCARB and instruct them to transmit to the NC Board of Architecture office a copy of your Council Record (Blue Cover).
- After review and approval by the Executive Director, you will receive an email stating your North Carolina License number. The North Carolina Board of Architecture does not issue temporary licenses for use during processing time and the applicant may not offer or render architectural services in the State until the Board issues a proper license.
- The Board directs the applicant's attention to the rules and laws governing the practice of architecture in North Carolina: General Statute 83A and 21 NCAC 02, both are available on the board web site [www.ncbarch.org](http://www.ncbarch.org) in the Rules/Laws section.
- You are required to notify the Board of all contact information changes. **All correspondence from NCBA will be via email.**

Name (as preferred on license):

Last \_\_\_\_\_ First \_\_\_\_\_ Middle (initial or name) \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Preferred Address  Home  Firm (select preferred)

Firm Name (If firm is preferred address, only.) \_\_\_\_\_

Street \_\_\_\_\_ Suite/Rm. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

NCARB Certificate Number:

\_\_\_\_\_

**Email Address:** \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Firm/Business Phone Number: \_\_\_\_\_

Alternate Phone Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Practice

In North Carolina I will offer/render my architectural services in the following manner, please select the appropriate method:

\_\_\_\_\_As a sole proprietor or an employee of a sole proprietorship.

The firm name is \_\_\_\_\_.  
(refer to rule 21 NCAC 02.0205)

\_\_\_\_\_As an employee, principle, officer, director or shareholder of a corporate entity.

The firm name is \_\_\_\_\_.  
(refer to rule 21 NCAC 02.0214 for NC corporations or 21 NCAC 02.0215 for out of state corporations and G.S. 83A-8\*)

\_\_\_\_\_As an employee, principle, member, manager or owner of a limited liability company.

The firm name is \_\_\_\_\_.  
(refer to rule 21 NCAC 02.0218 and G.S. 83A-8\*)

**\*An individual cannot hold himself out as offering architectural services for a corporation or LLC not registered to practice architecture in North Carolina. In cases of violation of General Statute 83A-8, the Board will prosecute the individual unless the employing corporation is licensed and registered in the State for architectural services. If a corporation or company (PA, PC, Inc, LLC, PLLC, etc.) employs you, please contact this office or our web site for the necessary forms to begin the firm registration process.**

\_\_\_\_\_As an employee or partner of a limited liability partnership.

The firm name is \_\_\_\_\_.  
(refer to rules 21 NCAC 02 .0204, .0205)

\_\_\_\_\_Other—Please describe in detail \_\_\_\_\_

Certification

\_\_\_\_\_ (initials) I hereby certify that I have read the laws and rules governing the practice of architecture in North Carolina and that I shall not violate the statute or any rules or standard of conduct published by the North Carolina Board of Architecture.

\_\_\_\_\_ (initials) I hereby apply for Registration and License to practice architecture by reciprocity with NCARB. My NCARB Certificate is current and in good standing. I understand that revocation of the NCARB certificate by NCARB shall automatically terminate my license to practice in North Carolina until such time as the certificate is reinstated by NCARB.

\_\_\_\_\_ (initials) I further certify that I have never been convicted of any felony and have never been the subject of disciplinary action in college or by another State architecture board or any other governing entity except as explained below. Attach a copy of the final order or similar documentation.

\_\_\_\_\_ (initials) I further certify that I have not offered or rendered architectural services as defined in G.S. 83A except as explained in the attached document.

The undersigned, deposes and says that he/she is the person making the forgoing statements and that they are in good faith and are true in every respect.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date