



The North Carolina Board of Architecture and Registered Interior Designers
434 Fayetteville Street Suite 2005
Raleigh, NC 27601
ncba@ncbarch.org
919-268-72903

2026-2027 Registered Interior Designer Renewal Form

Renewal fee and late fees: (N.C.G.S. 83A-11)

- 2026-2027 Renewal Fee is \$55.00.
- July 2, 2026 through July 31, 2026- \$55.00 late fee (for a total of \$110.00)
- After August 1, 2026- \$110.00 late fee (for a total of \$165.00)

Important Reminders:

- Returned checks will be assessed a charge of \$35.00.
- If you renewed on-line do not use this form.
- In order to continue practicing as a registered interior designer, you must renew the registration no later than June 30, 2026.
- If you do not renew by June 30, 2026, your registration will expire and be placed on delinquent status. If you offer or render registered interior design services after your registration expires you may be charged with non-registered practice.

Incomplete Renewal Forms Will Be Returned.

PLEASE PRINT CLEARLY

LAST, FIRST MIDDLE

NC Registration Number

Firm Name

Address

City State Zip

The above address is my (check one) HOME _____ or FIRM _____ address. If it is your HOME address, please do not include the firm name.

Preferred Phone Number

E-mail address

CONTINUED ON THE NEXT PAGE

Section One - Continuing Education Certification of Compliance

I certify that I have completed the required twelve hours of continuing education for the reporting period January 1, 2025, to December 31, 2025 as set forth in 21 NCAC 02.0903 (Non-residents should refer to 21 NCAC 02.0908)

_____(initials) YES, I certify that I have complied.

OR

I am exempt from the continuing education requirements for the following reason/s:

___ I am Exempt per rule 21 NCAC 02.0906 (1) "New Registrant".

___ I have served more than 90 consecutive days on Temporary Active Duty in the armed forces of the United States. Exempt per rule 21 NCAC 02.0906 (2).

___ I have applied for and was granted an exemption based on rule 21 NCAC 02.0906 (3) ("Medical exemption.")

OR

I certify that I HAVE NOT complied with the North Carolina Board of Architecture and Registered Interior Designers Rules and Laws requiring 12 contact hours of continuing professional education on health, safety and welfare issues during the 2025 calendar year. I understand that my registration will be placed on probation and renewed conditionally. I understand that I have until December 31, 2026 to obtain and submit documentation of the deficient contact hours for 2025 and that failure to comply may ultimately result in registration revocation.

___ I HAVE NOT COMPLIED, I AM DEFICIENT (amount) _____ HOURS. _____ (initials)

Questions regarding continuing education should be directed to Tyler Barrick at tyler@ncbarch.org

Section Two - Moral Character Data Please read and answer this section CAREFULLY.

(If you answer Yes to any of the following questions, please submit details and/or a copy of disciplinary action.)

-Since July 1, 2025, has your professional license/registration been denied, suspended, or revoked in any jurisdiction?

YES ___ (initials) OR NO ___ (initials)

-Since July 1, 2025, have you surrendered or allowed a professional license/registration to lapse in any jurisdiction due to pending or threatened disciplinary action?

YES ___ (initials) OR NO ___ (initials)

-Since July 1, 2025, have you been charged, arrested, convicted, found guilty or pleaded nolo contendere to any criminal offenses (excluding non-criminal traffic infractions) or have you been party to any civil litigation alleging that you committed fraud or gross negligence in the practice of architecture?

YES ___ (initials) OR NO ___ (initials)

-Since July 1, 2025 have you been investigated, charged, or disciplined since the filing of your last renewal application, or are you currently under investigation by any governing or licensing board (other than North Carolina) or by a state or federal agency?

YES ___ (initials) OR NO ___ (initials)

_____(initials) I certify that I have read and understand the Public Notice Statement required by NCGS § 143-764(a)(5). The Public Notice Statement is found at <http://www.ic.nc.gov/121317ECSPublicNotice.pdf>

_____(initials) I certify that I have not been investigated for employee misclassification per NCGS 143-764(a)(5). Questions regarding employee misclassification should be directed to NC Industrial Commission at 919-807-2582

Section Three - Certification

I certify that I have read the North Carolina Architecture and Registered Interior Designer Laws and Rules and I am qualified to practice registered interior design in the state of North Carolina. The information I have provided on this form is true and accurate to the best of my knowledge. (The laws and rules may be viewed at www.ncbarch.org.)

SIGNATURE OF REGISTERED INTERIOR DESIGNER

Date

PRINTED NAME

Return completed form to:
NCBA/RID
434 Fayetteville Street Suite 2005
Raleigh, NC 27601