# APPLICATION FOR ARCHITECT REINSTATEMENT GEORGIA STATE BOARD OF ARCHITECTS AND INTERIOR DESIGNERS

237 Coliseum Drive Macon, Georgia 31217 Phone (478) 207-2440 www.sos.georgia.gov/plb/architects

Please read the instructions carefully and be familiar with the laws and rules governing the practice of a Registered Architect in the State of Georgia. Visit the following website for information: <a href="https://www.sos.georgia.gov/plb/architects">www.sos.georgia.gov/plb/architects</a>.

The Board cannot process incomplete applications. If any item is missing, incomplete or incorrect, your application cannot be reviewed by the Board. Please review this application before you submit it to ensure that all information and documentation is complete and correct.

## Application must be returned in a 9 X 12 envelope, unstapled and unfolded.

**Reinstatement Fee:** When a license lapses in a current renewal year and a reinstatement application is received during the 5 month period after the late renewal period has ended (August. 1 through December 31) of that same current renewal year, the application fee will be \$150.00+ \$10.00 processing fee. If the reinstatement application is received after December 31<sup>st</sup>, the application fee will be \$150.00+ \$10.00 processing fee, plus the reinstatement fee will be \$250.00 per calendar year, or fraction thereof since the license lapsed. The Reinstatement Fee is in addition to the Application Fee and will not be pro-rated. **All fees are non-refundable**.

# REINSTATEMENT FEE SCHEDULE AND PDU REQUIRED (In addition to \$150.00 Application Fee+ \$10.00 processing fee)

Date License Lapsed	Date of Reinstatement Application	Reinstatement Fee (in addition to \$150.00 application fee+ \$10.00 processing fee) NON-REFUNDABLE	Total PDU required	Of the total PDU required, at least these units must be in Public Protection	
06/30/2023	08/01/2023-12/31/2023	Application fee only	36	24	
06/30/2023	01/01/2024-06/30/2024	\$250.00	36	24	
06/30/2023	07/01/2024-06/30/2025	\$250.00	48	32	
06/30/2021	2023	\$500.00	48	32	
06/30/2021	2024	\$750.00	48	32	
06/30/2021	2024	\$1,000.00	48	32	
Prior to 2021	Anytime	Maximum \$1,000	48	32	

Note: Professional Development Units (PDU)

At least 24 of the PDU must have been completed during the two (2) year period immediately preceding the date of application for reinstatement.

For Board Use Only	
Fee	Paid
Date	
Receipt #	
Applicant #	
Applicant #	



For Boar	d Use Only		
Date	of	Review	
Approved	<u></u>		
Disappro	ved		
Reinstate		•	

#### GEORGIA STATE BOARD OF ARCHITECTS AND INTERIOR DESIGNERS

237 Coliseum Drive, Macon, GA 31217 (478) 207-2440

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# APPLICATION FOR REINSTATEMENT OF ARCHITECT REGISTRATION APPLICATION FEE - \$150.00+ \$10.00 processing fee NON-REFUNDABLE SEE FEE SCHEDULE FOR REINSTATEMENT FEE

*This information is authorized to be obtained & disclosed to State & Federal agencies pursuant to O.C.G.A. § 19-11-1 & O.C.G.A. § 20-3-295, 42 U.S.C.A. § 551 & 20 U.S.C.A. § 1001  PHYSICAL ADDRESS  Number and Street (P. O. Box not acceptable)  MAILING ADDRESS  (If different than address above) Street/P. O. Box City  DAYTIME TELEPHONE #  E-MAIL ADDRESS  Providing your e-mail address allows us to notify you via e-mail when we receive your application and whe information on how to check the status of your application and how to verify licensure. Also, if further infostaff to contact you so that your application can be processed in the most efficient manner. Your email address allows us to notify you via the most efficient manner. Your email address allows us to notify you via the most efficient manner. Your email address allows us to notify you via the most efficient manner. Your email address allows us to notify you via the most efficient manner. Your email address allows us to notify you via the most efficient manner. Your email address allows us to notify you via the most efficient manner. Your email address allows us to notify you via the most efficient manner. Your email address allows us to notify you via the most efficient manner. Your email address allows us to notify you via the most efficient manner. Your email address allows us to notify you via the most efficient manner. Your email address allows us to notify you via the most efficient manner.		State	Last Zip Code
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E-MAIL ADDRESS			
Since the date of last renewal of this license, have you been convicted of a felony o or entered a plea of guilty, nolo contendere, or a plea under the "First Offender Ac agency? DUI and DWI are not minor traffic offenses.	RED	(other than minor t	traffic violation
( ) YES ( ) NO (If YES, attach certifi	ed copy of con	viction or plea)	
I certify that I have completed hours of professional development for refor in the enclosed copy of Chapter 50-6 of the Rules of the Board. I have attached even to support this statement. Such evidence shall include evidence of completion of each of each course or program, and verification of the number of hours of each course or requirements, such documentation as to ascertain their completion. Certificates of Att of evidence.	dence of comp course or pro r program; or,	pletion of profession gram, a description for other activities	of the contents which meet the
PROFESSIONAL ACTIVITIES SINCE LAST RENEWAL			
REASON FOR FAILING TO RENEW			

#### **AFFIDAVIT**

SEAL

My Commission Expires\_\_\_\_\_

I hereby swear and affirm that all information provided in this application is true and correct to the best of my knowledge and belief. I further swear and affirm that I have read and understand the current state laws and rules and regulations of the Georgia State Board of Architects and Interior Designers, and I agree to abide by these laws and rules, as amended from time to time. By signing this application, electronically or otherwise, I hereby swear and affirm one of the following to be true and accurate pursuant to O.C.G.A. § 50-36-1: 1) \_\_\_\_\_ I am a United States citizen 18 years of age or older. Please submit a copy of your current Secure and Verifiable Document(s) such as driver's license, passport, or other document as indicated on pages 5 and 6 of the application. 2) I am not a United States citizen, but I am a legal permanent resident of the United States 18 years of age or older, or I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older with an alien number issued by the Department of Homeland Security or other federal immigration agency. Please submit a copy of your current immigration document(s) which includes either your Alien number or your I-94 number and, if needed, SEVIS number. In making the above attestation, I understand that any failure to make full and accurate disclosures may result in disciplinary action by the Georgia State Board of Architects and Interior Designers and/or criminal prosecution. Signature of Applicant I certify that the above applicant this day produced the foregoing application to the Georgia State Board of Architects and Interior Designers to me. Subscribed and sworn to before me this day of , . Notary Public

### Secure and Verifiable Documents Under O.C.G.A. § 50-36-2

Issued August 1, 2011 by the Office of the Attorney General, Georgia

The Illegal Immigration Reform and Enforcement Act of 2011 ("IIREA") provides that "[n]ot later than August 1, 2011, the Attorney General shall provide and make public on the Department of Law's website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General." O.C.G.A. § 50-36-2(f). The Attorney General may modify this list on a more frequent basis, if necessary.

The following list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.

A United States passport or passport card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

A United States military identification card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

A driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

An identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

A tribal identification card of a federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be found at:

http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

A United States Permanent Resident Card or Alien Registration Receipt Card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

An Employment Authorization Document that contains a photograph of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

A passport issued by a foreign government [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

A Merchant Mariner Document or Merchant Mariner Credential issued by the United States Coast Guard [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

A Free and Secure Trade (FAST) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]

A NEXUS card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]

A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]

A driver's license issued by a Canadian government authority [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

A Certificate of Citizenship issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]

A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]

In addition to the documents listed herein, if, in administering a public benefit or program, an agency is required by federal law to accept a document or other form of identification for proof of or documentation of identity, that document or other form of identification will be deemed a secure and verifiable document solely for that particular program or administration of that particular public benefit. [O.C.G.A. § 50-36-2(c)]

# READ CAREFULLY

# GEORGIA STATE BOARD OF ARCHITECTS AND INTERIOR DESIGNERS

# PROFESSIONAL DEVELOPMENT UNIT (PDU) / CONTINUING EDUCATION UNIT (CEU) AUDIT REPORT

For the Two-Year CEU Reporting Period Prior to the Renewal Deadline

Health Safety Welfare (HSW);

Learning Unit (LU) is a non- HSW unit

CERTIFICATES FOR HSW HOURS MUST SAY <u>HSW</u> OR WILL NOT BE ACCEPTED AS HSW

PLEASE PRINT OR TYPE Page of \_\_\_

Institute, Organization, Provider, or Agency Conducting Course PLEASE ORGANIZE CERTIFICATES AND LIST IN THE SAME CHRONOLOGICAL ORDER	Provider Number	Title of Course, Course Number and Description of Content  NCARB Terminology: Continuing Education Unit (CEU); Professional Development Units (PDU); Continuing Education Hours (CEH); Health Safety and Welfare (HSW); Learning Unit (LU)	Dates Attended	Public Protection Units or HSW*	Related Practice Units or LU*	Documentation Attached √
<u> </u>		Total Hours Clai	imed			
AFFIDAVIT *NOTE	: Units mus	st be in either HSW or LU columns, but n	ot in both o	columns		I
I certify that the above is true and	accurate in	formation and I have attached required of	documentat	ion.		
Signature of Registered Architect/		Sworn to and subscribed before		-		
Interior Designer		Notary Public				
Printed/Typed Name of Registered Architect/ Interior Design	ner	NO	OTARY SE	AL		
License No Daytime Telephone No			Please return form and documents to			
Email Address:		Georgia Board of Architects and Interior Designers by mail, email, or fax				