



**West Virginia Board of Architects**  
 405 Capitol Street, Mezzanine Suite 3  
 Charleston, WV 25301  
 Phone (304)-558-1406, Fax (304)-558-1407  
 brdarch.wv.gov

**RENEWAL FEE**

Fee \$ \_\_\_\_\_ Penalty \$ \_\_\_\_\_  
 Check # \_\_\_\_\_ Receipt # \_\_\_\_\_  
 Date Received \_\_\_\_\_

# Application for Renewal Individual Architect Registration

July 1, \_\_\_\_\_ – June 30, \_\_\_\_\_

Name: \_\_\_\_\_  
 Firm Name: \_\_\_\_\_  
 Address: \_\_\_\_\_

WV Registration #: \_\_\_\_\_  
 Last Four SSN: \_\_\_\_\_  
 Telephone #: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

**ANNUAL RENEWAL FEE** \$75 if received on or prior to June 30 OR \$150 if received within 6 months of annual renewal date.

Note: All registration certificates expire on June 30.

- A.** Have you been convicted of a felony, crime, or misdemeanor involving fraud, deceit, or misrepresentation or been convicted of any crime other than a minor traffic violation in any jurisdiction?  Yes  No  
 Have you been disciplined by an occupational licensing board?  Yes  No  
 Are you currently under investigation by an occupational licensing board?  Yes  No  
 Has any registration been denied, suspended or revoked by a jurisdiction?  Yes  No  
 Have you signed any legal document that settles a dispute or charges against you brought by a registration board or a Court of Law?  Yes  No  
*If you have responded yes, please provide an explanation on the back of this form along with supporting documents.*
- B.** Pursuant to WV Code 48-15-303 each applicant for registration must answer the following questions and certify, under penalty of false swearing, that these answers are true and correct.
- 1.** Do you have a child support obligation?  Yes  No  
 a. If the answer to question 1 above is yes, are you in arrearage?  Yes  No  
 b. If the answer to question 1 above is yes, does your arrearage equal or exceed the amount of child support payable for six (6) months?  Yes  No  
 c. If the answer to question 1 above is yes, are you the subject of a child support related subpoena or warrant?  Yes  No
- 2.** Do you own all or part of a business that operates in West Virginia?  
 If yes, please provide the FEIN # \_\_\_\_\_  Yes  No
- 3.** Are you delinquent in your payments for Workers' Compensation and/or Unemployment Compensation in West Virginia?  Yes  No
- C.** I have completed a minimum of twelve continuing education hours designated as Health, Safety, and Welfare topics during the prior calendar year. I understand that it is my responsibility to maintain records in support of these activities for two (2) calendar years in the event I am randomly selected for a CE audit.  Yes
- D.** You are exempt from the continuing education requirement if this is your first annual renewal after your initial registration.  Yes  No

**I certify that I have read and I am familiar with Article 12. – Architects Act of the West Virginia Code and the rules of the West Virginia Board of Architects and I am qualified to practice architecture in the State of West Virginia. The above information is true to the best of my knowledge.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Completed application and required fee payable to West Virginia Board of Architects must be received no later than June 30th.  
 FAILURE TO RENEW BY JUNE 30TH SHALL CAUSE AUTOMATIC SUSPENSION OF REGISTRATION WITHOUT NOTICE.

Solicitation of the Social Security Number and FEIN Number is solely to identify individuals default on Workers Compensation and Child Support Payments to the State of WV. The Last 4 digits of your Social Security Number is your PIN Number to renew your registration online with the WV Board of Architects.

The West Virginia Board of Architects is a public agency and records of the Board are considered to be public records. Some or all of the information in this application may be disclosed to any person under the West Virginia Freedom of Information Act (FOIA).

