



South Carolina Department of Labor, Licensing and Regulation  
**South Carolina Board of Architectural Examiners**  
110 Centerview Dr. • Columbia • SC • 29210 (overnight)  
P.O. Box 11419 • Columbia • SC 29211-1419 (mailing)  
Phone: 803-896-4408 • Contact.Arch@llr.sc.gov • Fax: 803-704-6772  
www.llr.sc.gov/arch

## **INSTRUCTIONS FOR COMPLETING AN APPLICATION TO REINSTATE FIRMS, CORPORATIONS OR PARTNERSHIPS**

**NOTE: If you are an out-of-state or foreign entity, the Certificate of Authorization (COA) application must be accompanied by the Certificate of Authority issued by the South Carolina Secretary of State.**

**Fees:** The nonrefundable fee (\$100.00) must accompany the application. Fee should be made payable to “LLR-Architectural Board”.

### **TYPE OF ORGANIZATION**

Identify type of entity (Business Corporation, Partnership, Professional Corporation, Firm/Sole Proprietorship, Limited Liability Corporation or Limited Liability Partnership). If the company is a Business Corporation, Partnership, Professional Corporation, Limited Liability Corporation or Limited Liability Partnership, a Tax ID Number must be furnished or application cannot be processed. If Firm/Sole Proprietorship, a Social Security Number must be furnished or application cannot be processed.

### **FEIN/Social Security No.**

Applications cannot be processed without FEIN/SSN

### **STATE OF ORIGINAL INCORPORATION**

List the state and date of the firm’s original incorporation. Out-of-state or foreign entities must have a certificate of authority from the South Carolina Secretary of State, a copy of which must be attached to this COA application form. South Carolina entities must have a certificate of existence or certificate of good standing from the South Carolina Secretary of State, a copy of which must be attached to this COA application form. In order to download the appropriate forms, visit their website at [www.SC.SOS.gov](http://www.SC.SOS.gov). If you have questions concerning the registration, please contact the South Carolina Secretary of State (803) 734-2158. The Secretary of State requires that Out-of-state or foreign entities provide a physical address in SC for receipt of correspondence should that be necessary. Post Office boxes are not acceptable. Or, you may contact <https://registered-agent-listings.com/> to find a registered agent.

### **SERVICES OFFERED**

Identify services offered by company.

### **BUSINESS INFORMATION (Principal Address)**

Give business name, complete mailing address, email, telephone and fax.

### **PRINCIPALS, PARTNERS, OFFICERS AND DIRECTORS OF APPLICANT**

List the Principals, Partners, Corporate Officers, Owners and Directors. Furnish name, title, profession and resident state registration number.

### **ARCHITECT IN RESPONSIBLE CHARGE OF ARCHITECTURAL WORK IN SOUTH CAROLINA**

Furnish the name of the individual who is a SC Architect who will be the “Architect in Responsible Charge”. Indicate SC Architect’s name and SC License Number.

### **DISCIPLINE QUESTIONS**

Answer all questions. If the answer to any of these questions is yes, please explain on a supplemental sheet. Attach a detailed written explanation along with any supporting documentation (i.e., Consent Agreement, Board Order, etc.)

### **AFFIDAVIT**

Complete the Affidavit Section and have it signed by an officer of the firm and the architect in charge of the work performed in South Carolina.



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**APPLICATION FOR CERTIFICATION OF AUTHORIZATION (COA)  
BY REINSTATEMENT**

**Submit the following with your application to the above address:**

- Application fee in the form of a check or money order (no cash) in the amount of **\$100**. Make checks payable to “LLR-Architectural Board”.  
(All fees are non-refundable. A returned check fee of up to \$30, or an amount specified by law, may be assessed on all returned funds.)
- Out-of-state or foreign entities must have a certificate of authority from the South Carolina Secretary of State, a copy of which must be attached to this COA application form.
- South Carolina entities must have a certificate of existence or certificate of good standing from the South Carolina Secretary of State, a copy of which must be attached to this COA application form.

**TYPE OF ORGANIZATION**

- |  |  |
|--|--|
| <input type="checkbox"/> Business Corporation                | <input type="checkbox"/> Professional Corporation            |
| <input type="checkbox"/> Partnership                         | <input type="checkbox"/> Firm/Sole Proprietorship            |
| <input type="checkbox"/> Limited Liability Corporation (LLC) | <input type="checkbox"/> Limited Liability Partnership (LLP) |
| <input type="checkbox"/> Other: _____                        |  |

**FEIN/Social Security No.\*:** \_\_\_\_\_

*\* Application cannot be processed without FEIN/SSN*

**STATE OF ORIGINAL INCORPORATION:** \_\_\_\_\_

Date certificate of authority, certificate of existence, or certificate of good standing was issued by South Carolina Secretary of State: \_\_\_\_\_

**SERVICES OFFERED**

Services offered by company: \_\_\_\_\_

**BUSINESS INFORMATION**

Business Name: \_\_\_\_\_

DBA Name (if applicable): \_\_\_\_\_

Principal Address: \_\_\_\_\_

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

Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Email: \_\_\_\_\_

**PRINCIPALS, PARTNERS, OFFICERS AND DIRECTORS OF APPLICANT**

List the Principals, Partners, Corporate Officers, Owners and Directors: (Attach additional sheets if necessary.)

Name	Title	Profession	Resident State Registration No.

**ARCHITECT IN RESPONSIBLE CHARGE OF ARCHITECTURAL WORK IN SOUTH CAROLINA**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

South Carolina Registration No.: \_\_\_\_\_

**DISCIPLINE QUESTIONS**

If you answer “Yes” to any of the below questions, please attach a detailed written explanation along with any supporting documentation. (i.e., Consent Agreement, Board Order, etc.)

1. Has any state taken disciplinary action against your firm’s license?  Yes  No
2. Has your firm surrendered or allowed a professional or occupational registration/license to lapse in any jurisdiction due to any pending or threatened disciplinary action?  Yes  No
3. Has your firm been found by a court or registration board to have violated the architectural registration laws or the professional/occupational laws of any jurisdiction? (If yes, provide dates and details including results of any appeals, if not previously provided to this board.)  Yes  No
4. Has your firm entered into any negotiated settlement with regard to professional or occupational registration laws? (If yes, provide dates and details including results of any appeals, if not previously provided to this board.)  Yes  No
5. Has your firm provided architectural services in South Carolina during the period the license was lapsed? (If yes, please provide projects and dates services were provided, professional fees received and the architect who performed the work.)  Yes  No

**STATEMENT OF LICENSEE IN RESPONSIBLE CHARGE**

I, \_\_\_\_\_, the undersigned, acknowledge and agree to the designation of the licensee in full authority and responsible charge of the practice of architecture for

\_\_\_\_\_  
(name of firm)

\_\_\_\_\_  
Signature of Licensee in Responsible Charge

\_\_\_\_\_  
SC License No.

**AFFIDAVIT**

- 1) Our company has neither offered/provided nor will we provide architectural services services in the State of South Carolina prior to obtaining South Carolina Registration.
- 2) We have offered and/or provided architectural services in the State of South Carolina as herein listed during the period the license was lapsed (provide list of projects, fees collected, and the architect(s) who performed the work).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand that our company is not licensed at this time to offer or perform architectural work in South Carolina, and until such time as we are authorized by South Carolina Board of Architectural Examiners, any work would be a criminal violation of the South Carolina Code of Laws.

The undersigned declares and affirms, under penalty of perjury, that he/she has read, and that each person whose name is listed as responsible for the architects practice in South Carolina has already read, and agrees to adhere to the statutes and regulations enacted by the State for the practice of architecture in South Carolina. The aforementioned parties understand that information submitted on and in support of this application may be subject to public scrutiny or release under the South Carolina Freedom of Information Action or other provisions of federal and state laws. Furthermore, the undersigned also affirms that all statements herein contained are true in substance and effect and are made in faith.

- (a) For corporations, signature of Chief Executive Officer or person authorized as the responsible professional in charge.
- (b) For partnership, signature of Managing Partner
- (c) For non-exempt proprietorship, signature of Owner.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

**PRIVACY NOTICE**

South Carolina law requires the agency to collect personal information which is only disseminated as required by law. The South Carolina Freedom of Information Act ensures that the public has a right to access appropriate records and information possessed by a government agency. Therefore, some personal information on your renewal application and other documents on file may be subject to public scrutiny or release. The Department collects and disseminates personal information in compliance with The South Carolina Freedom of Information Act, the South Carolina Family Privacy Protection Act and other applicable privacy laws and regulations. Additionally, the Department shares certain information on the application with other governmental agencies for various governmental purposes, including research and statistical purposes.