Commonwealth of Virginia
Department of Professional and Occupational Regulation
9960 Mayland Drive, Suite 400
Richmond, Virginia 23233-1485
(804) 367-8506
www.dpor.virginia.gov
Box



Board for Architects, Professional Engineers, Land Surveyors,
Certified Interior Designers and Landscape Architects
BUSINESS ENTITY REGISTRATION RENEWAL FORM
Fee \$50.00

A check or money order payable to the <u>TREASURER OF VIRGINIA</u>, or a completed <u>credit card insert</u> must be mailed with your application package.

APPLICATION FEES ARE NOT REFUNDABLE.

<u>General Information</u> - A business cannot be renewed more than 90 days prior to the expiration date. The department automatically mails a renewal notice to the business address of record approximately 45 days prior to the expiration date.

1.	Provide the Virginia bu	usiness registration number below	pelow: * Expiration Date				
	Virginia Reg. Numbe	er					
	* If a renewal payment is not <u>received</u> within 30 days after the expiration date on the business registration, an additional \$25 late fee will be charged. If payment is not <u>received</u> within 6 months after the expiration date on the business registration, the business will be required to reinstate their registration. Reinstatement applications are available on the Board's website: www.dpor.virginia.gov/Boards/APELS/						
2.	Business Name						
3.	Assumed or Fictitious	Name					
4.	Contact Numbers*						
5.	Email Address*	Primary Telephone	Alternate Telephone				
0.	Liliali Address	Email address is considered a	public record and will be disclosed upon request from a third party.				
6.	By submitting this app	lication, I certify the following sta	tements:				
	Conduct inclu	ding regulation 18VAC10-20-78	tinued compliance with the Board's Standards of Practice 0, as established by the Board for Architects, Profess signers, and Landscape Architects (APLESCIDLA Board)				
	•		and is in compliance with all the laws of Virginia under Chapter 4 of the Code of Virginia and the APELSCIDLA Bo				
/lail	this form, along with the	renewal fee (check or a complete	ed <u>credit card payment form</u>) to the following address:				
	Department of Professi 9960 Mayland Drive, S Richmond, VA 23233-1		n				

OFFICE USE ONLY	DATE	FEE	TRANS CODE	ENTITY#	FILE #/LICENSE #	ISSUE DATE
			2020		04	