## STATE OF NEVADA

# **RESIDENTIAL DESIGN REGISTRATION BY RECIPROCITY APPLICATION**

Dear Applicant:

In response to your request, enclosed is the application form for residential design registration by reciprocity in the state of Nevada. Please read the qualifications necessary to be eligible for residential design registration before proceeding. If you do qualify, please complete the form and return the original to our office with the \$300 application processing fee. You may wish to keep a copy for your files. Applications will not be processed unless the application is fully completed and any applicable statutory fees are remitted.

This application packet consists of a two-page application, one copy of Chapter 623 of the Nevada Revised Statutes, one copy of the Blue Book publication and a copy of the Nevada Lien Law. If your application package is not complete, please contact the board office.

### **APPLICATION PREPARATION**

1. If the preferred mailing address is not indicated, all correspondence from this office will be sent to your business address.

2. The required photograph should be  $2\frac{1}{2} X 2\frac{1}{2}$  (approximately) and similar to a passport photo, taken not more than 12 months prior to the application. Black and white photocopies are not acceptable. Affix the photograph firmly to the application on page one. Sign the photograph so as not to obscure features.

3. The application requires two signatures, one of which must be before a Notary Public. The second is on your photograph.

4. An application processing fee of US\$300 must accompany your application. All funds must be submitted in US Dollars.

5. Oral interview (discretionary).

Each applicant may or may not be required to appear before the board for an oral interview. The applicant is required to take an open-book written test on Chapter 623 of the Nevada Revised Statutes, Blue Book and Rules of Conduct. The board will review the test, application, integrity and ethical standards for registration in the state of Nevada.

#### NEVADA STATE BOARD OF ARCHITECTURE, INTERIOR DESIGN & RESIDENTIAL DESIGN



2080 E. Flamingo Rd., Suite 120 Las Vegas, NV 89119

(702) 486-7300 - Phone (702) 486-7304 - Fax nsbaidrd@nsbaidrd.nv.gov - E-mail nsbaidrd.state.nv.us - Internet

## APPLICATION FOR RESIDENTIAL DESIGN REGISTRATION BY RECIPROCITY

I hereby apply for registration to practice residential design in the state of Nevada by reciprocity. \* PLEASE TYPE APPLICATION \* \* APPLICATION DOWNLOADED FROM WEB SITE MAY BE COMPLETED ON COMPUTER \*

lf you have had	d a legal name change please attach a notarize	d document attesting to this fact.
Date:		
Name in Fu	ıll:	PHOTO IN THIS SPACE. PHOTO MUST BE SIGNED
Social Sec		License No: BY YOU AND DATED. APPROXIMATE PHOTO
	e your name to ur wall certificate	SIZE: 2 ½" x 2 ½"
	Firm Name:	
Business Address	Street:	
	City:	State: Zip Code:
Residence Address	Street:	
	City:	State: Zip Code:
Address fo	or Correspondence: 🗌 Business	☐ Residence
Daytime T	elephone No.:	Fax No.:
Evening T	elephone No.:	Email Address:
Citizenshi	p:	Birth Naturalized
Birth Date	:	Place:
Jurisdictio	n of Original Architectural Registratior	:
Date Issue	ed: MM/DD/YY	Registration No.
Is the regis	stration currently in good standing?	Yes No (If no, explain on supplemetal sheet)
Entorod in	database (date/initials)	FOR BOARD USE ONLYFee_received (date/amount)

Name in Full:				Date:					
Obtained by NC	CARB:								
<ul> <li>36-hour written exam</li> <li>Less than 36-hour written exam</li> </ul>				NCARB Structural Design exam subsequent to Dec. 1, 1965 or the NCARB Equivalency and Professional exams					
Professional exam only				Other (explain):					
Professiona	Professional and Equivalency exams								
Other Registrations (please use a separate sheet if necessary):									
Jurisdiction		Reg. No.		Date Issued	In good standing?				
Jurisdiction		Reg. No.		Date Issued	In good standing?				
Have you or any representative of your firm held yourself out, put out any sign, card or other device or prepared drawings for any project located in Nevada or project contemplated for Nevada? (If yes, explain on supplemental sheet)									
Tes No Has your registration been denied, suspended, or revoked in any jurisdiction? (If yes, explain on supplemental sheet)									
Yes No	Have you surrendered or allowed a registration to lapse in any jurisdiction due to an action pending or threatened? (If yes, explain on a supplemental sheet)								
Yes 🗌 No	Have you 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)								
Yes 🗌 No	Have you ever been convicted of a felony, any crime involving moral turpitude, or a misdemeanor involving fraud, deceit or misrepresentation? (If yes, explain on supplemental sheet)								
☐ Yes ☐ No Are there any felony criminal charges now pending against you? (If yes, explain on supplemental sheet)									
Pursuant to NRS 623.225, payment of child support, an applicant for the issuance or renewal of a certificate of registration to practice architecture is required to answer the following questions. A certificate of registration may not be issued or renewed by the board if the applicant fails to do so.									
$\square$ Yes $\square$ No Are you currently subject to a court order, or a plan approved by the district attorney or other public agency enforcing the amounts owed under a court order, for the support of a child?									
Yes I No If yes, are you currently in compliance with the court order and/or plan?									
The undersigned and that they ar residential desig process is comp	e made in good fa gn for any project leted and the appro	, upon their oath dep ith and are true in ev	very resp or project een grante	ect. I will not conduct a contemplated for New	person making the foregoing statement any activities constituting the practice of rada until such time as the application				
in this applicatio and correct in	n, have read the co every respect, and ed or to have my r	ontents thereof, and t I do realize that a f	being o the bes raudulent	t of my knowledge and statement in this app	es and says: I am the applicant named belief, the foregoing statements are true lication is probable cause to have my read and do understand Chapter 623 of				
	day of	, 20		<u></u>					
				Signature of Applicant					
	(Notary Seal)								
				Signature of Notary Public					
				My commission expires					
Please remit US\$300 with this application. All funds must be submitted in US\$.									