

## Application for Licensed Architect

*(Architects currently licensed in U.S.A. applying through reciprocity)*

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**Please Note: The attached application is for individuals who are currently licensed or registered as an architect in the U.S.A. and no other Canadian jurisdiction and intend to practise architecture in Nova Scotia.**



*The following is a checklist of information and/ or documentation which must be submitted with your application:*

- Completed Application for Licensed Architect
- NCARB Certificate Record in Support of Application For State Registration (Blue Cover File) sent directly from NCARB.
- Confirmation of registration/licence from all jurisdiction in which applicant is currently licensed *(Only applicants whose home jurisdiction possess reciprocity with Nova Scotia through the existing Inter-Recognition Agreement between the U.S. and Canada may apply. You must confirm with your home jurisdiction if they are a signatory on the current agreement.)*
- Confirmation from your home jurisdiction that you are currently up to date with your Continuing Education requirements, and were compliant with those requirements at the end of your jurisdiction's last Continuing Education Cycle.
- Certificate of Insurance (Demonstrating current Professional Liability Insurance)
- Payment in the amount of \$339.25 (Application Fee + Tax) *(Please submit separate cheques)*
- Payment in the amount of \$1132.50 (Dues + Tax) *(Please submit separate cheques)*  
***\*Dues are refundable if membership is not approved and quarterly prorated at time of approval of membership. A cheque for reimbursement for the difference will be issued to the applicant upon approval of membership.\****
- Payment in the amount of \$92.00 *(Please submit separate cheques)*  
 (Licensed Architect Stamp Fee + Tax)

**Please be advised that:**

- A corporate permit is required for practice by a partnership or a corporate entity.
- You will require proof of liability insurance (in the form of a certificate of insurance), and documentation confirming that this insurance covers all work in Nova Scotia (this may be in the form of a letter from the insurer), unless exempt under regulation 10(2).
- All dues and fees include 15% HST. Dues and fees can be paid by either cheque or credit card.

***Please select payment method:***

- Cheque enclosed for \$ \_\_\_\_\_ payable to ***Nova Scotia Association of Architects***
- Charge \$ \_\_\_\_\_ to Credit Card:          

**Credit Card #** \_\_\_\_\_ **Exp. Date** \_\_\_\_\_ / \_\_\_\_\_

**Cardholder Name** \_\_\_\_\_

**Signature** \_\_\_\_\_

**A. IDENTIFICATION**

1. Name in Full: \_\_\_\_\_  
Surname First Name Middle Name(s)

Please check one:  Miss  Mrs.  Ms.  Mr.

Name as it should appear on the Certificate/Seal: \_\_\_\_\_

2. Residence Address: \_\_\_\_\_  
Street Apt. No.

\_\_\_\_\_  
City Province/Territory/State Postal Code Country

3. Place of Business: \_\_\_\_\_  
Firm Name

\_\_\_\_\_  
Street Suite No.

\_\_\_\_\_  
City Province/Territory/State Postal Code Country

Please check one:  Sole Proprietorship  Partnership  Corporation  Partnership of Corporations

4. Resident Tel: ( ) \_\_\_\_\_ Business Tel: ( ) \_\_\_\_\_

5. E-Mail: \_\_\_\_\_

6. Please check the contact information you would like to appear on the NSAA website and directory:

Place of Business  Business Address  Business Telephone  E-Mail

**B. LICENCE HISTORY** *(Use supplementary sheets if necessary.)*

1. Jurisdiction in which **first** Licence issued:

Jurisdiction	Licence Number	Date Licence issued

2. List all jurisdictions in which you **currently** hold a Licence:

Jurisdiction	Licence Number	Date Licence issued

3. List all jurisdictions in which you **previously** held a Licence and provide the reason you no longer hold a Licence in those jurisdictions:

Jurisdiction	Licence Number	Date Issued	Date Resigned/Cancelled	Reason Resigned/Cancelled

**B. LICENCE HISTORY** *(Continued)*

- 4. Have you ever been denied a Licence? Yes  No
- 5. (a) Has your Licence ever been suspended or revoked? Yes  No   
 (b) Has your Licence ever been canceled? Yes  No
- 6. Have you resigned your membership in any organization of architects or allowed your Licence to lapse for any reason? Yes  No
- 7. Have you ever been convicted of an offence which may be relevant to your suitability to practise architecture? Yes  No
- 8. (a) Have you ever been found guilty of professional misconduct or incompetence? Yes  No   
**and/or**  
 (b) Is your conduct or competence presently the subject of proceedings? Yes  No
- 9. Was your conduct or competence under review at the time of your resignation or cancellation? Yes  No
- 10. Have you been issued a Licence in any jurisdiction which is subject to any Terms, Conditions, or Limitations? Yes  No
- 11. Has your conduct or competence ever been under review by any professional regulatory body? Yes  No

**If you have answered “yes” to any of questions 4. to 11., use a supplementary sheet to provide dates and details.**

**C. DECLARATION**

I DO SOLEMNLY DECLARE:

THAT I am applying for a Licence under the *Architects Act* of the **Province of Nova Scotia**;

THAT I agree to comply with the *Architects Act*, its pursuant *Regulations* and the *By-Laws of the Nova Scotia Association of Architects*, all as amended;

THAT the facts set out in this Application for Licence are true and correct in every particular;

THAT I understand that I must maintain Professional Liability Insurance, as per section 10 of the Regulations pursuant to the Nova Scotia Architects Act, up to and including the warranty period following completion of all projects, unless exempt under Section 10(2) of the Regulations. I understand that this Professional Liability Insurance must cover all work on projects in Nova Scotia during this time;

AND I MAKE THIS solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath;

IN ADDITION, I hereby consent and authorize my home jurisdiction to release and disclose to the jurisdiction to which I am making this Application for Licence, all information and documents that in any way relate to any past, current or pending investigations or proceedings involving my conduct or competence.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date