



**Architects' Association
Of
New Brunswick**

P.O. Box 5093
Sussex, New Brunswick
E4E 5L2

**APPLICATION FOR
CERTIFICATE OF PRACTICE**

Name of Practice (please print)

Date of Application

To ensure your application may be processed in a timely manner, it must be complete when it is returned to the AANB office. The following items should be borne in mind when completing your application.

1. **Practice Name** – Ensure the name for which you apply for your Certificate matches exactly the name in your articles of incorporation.

If you wish to use both an English and French name for your firm, please ensure both versions of the name are given on the application for your Certificate.
2. **Address** – Complete in full, including postal code.
3. **Forms of Practice** – Indicate one of the three forms of practice. In the case of a corporation, please note your application must include a copy of the articles of incorporation. To ensure prompt processing of a corporate application, please ensure that these documents accompany the application.
4. **Sample Letterhead** – A sample of your firm’s letterhead must accompany the application. By-laws 6.5.4 states: “Holders of a Certificate of Practice shall include on their letterhead the names of all persons responsible for the practice of architecture. The name(s) shall be shown separate and apart from the name of the practice.” These names shall be accompanied by the person’s professional designations.
5. If the applicant is the employee of a current Certificate of Practice holder, a letter from his employer, indicating the employer’s consent for the employee to hold that Certificate in his own right must accompany the application.
6. **Section 2** – Must be completed by all applicants. Please indicate the member’s name, his title within the practice, whether the member is responsible for the practice of architecture, and the professional associations with which the individual is registered.
7. **Section 3** – Must be completed by all corporate applicants.
8. **Section 4** – Please give the names of those Registered or Reciprocal members authorized to affix the practice’s stamp. As the information in this section will be used to order the practice stamps, please indicate the names in the form in which they are to appear on the Certificate of Practice stamp.
9. **Fees** – All fees must accompany the completed application.
 - a) **Application Fee:** A one-time administration fee is required for processing your application. The fee is \$250.00 + \$37.50 HST = \$287.50 per completed certificate of practice application. If your application is not approved, the fee is not refunded.
 - b) **Certificate of Practice Fee:** is calculated at the rate of \$620.00 + \$93.00 HST = \$713.00 per member responsible for the practice of architecture as listed in Section 2 of the application, and per person authorized to affix a stamp as indicated in Section 4 of the application, where these persons differ.
 - c) **Reinstatement Fee: (if applicable)**
Certificate of Practice holders in good standing who have allowed their Certificate of Practice to lapse for a period of not more than three (3) years shall be assessed fees and dues consisting of:
 - dues in arrears for the year(s) of lapsed membership
 - dues for the current year
10. **Mandatory Liability Insurance Coverage** – The AANB has a requirement for mandatory liability insurance coverage for all Certificate of Practice holders. Evidence of this coverage, in the form of a Certificate of Insurance issued by the Underwriter, must accompany your application for Certificate of Practice. Letters from insurance agents or brokers do not fulfill this requirement.
11. **Joint Venture** – In the case of a Joint Venture, applicants shall file with the application for a Certificate of Practice a memorandum summarizing the Joint Venture and the members thereof.

SECTION 1

Practice Name: _____

Telephone: _____ Facsimile: _____

Street Address: _____

City: _____ Province: _____ Postal Code: _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

E-mail Address: _____ Web Page: _____

Contact Person: _____ E-mail: _____

- I/We hereby make application for a Certificate of Practice as required by the New Brunswick Architects Act on behalf of the above-named practice.
- I/We hereby certify that one of the principal and customary functions of the above-named is the practice of architecture.
- I/We hereby certify that the practice of architecture will be carried out under the supervision and responsibility of (indicate one):
 - In the case of a **SOLE PROPRIETORSHIP**, the principal of the sole proprietorship, who is an architect.
 - In the case of a **PARTNERSHIP**, an architect who is a partner, an employee of the partnership, or an officer, director or employee of a corporate partnership. Any non-resident partnership or corporation applying for a Certificate of Practice to practice architecture in New Brunswick shall satisfy the Council that at least two-thirds of the partners, principals or directors of the partnership or corporation as the case may be are architects or engineers and at least one of whom is an architect.
 - In the case of a **CORPORATION**, a director, officer or employee of the corporation. Any non-resident partnership or corporation applying for a Certificate of Practice to practice architecture in New Brunswick shall satisfy the Council that the majority of the issued shares of each class of voting shares of the corporation are beneficially owned by and registered in the name of architects and engineers.

NOTE: In the case of partnerships, corporations or partnership of corporations, all partners, officers or directors, who are Architects, shall be Registered Members of the Association.

- **ATTACHED HEREWITH** is a copy of the articles of incorporation for said corporation.
- **ATTACHED HEREWITH** is a copy of the letterhead of the practice.
- I/We hereby being employed by a Certificate of Practice holder, enclose a letter from my employer indicating that I have consent to provide architectural services to the public.

SECTION 2

Name the principals, partners or directors. Indicate which ones are responsible for the practice of architecture as defined in the New Brunswick Architects Act, and state the professional associations with which they are registered.

Any non-resident partnership or corporation applying for a Certificate of Practice to practice architecture in New Brunswick shall satisfy the Council that:

- (a) at least two-thirds of the partners, principals or directors of the partnership or corporation as the case may be are architects or engineers and at least one of whom is an architect.

Name	Title	Responsible for the Practice of Architecture	Professional Associations

SECTION 3

List all of the shareholders of the company and the number of each class of shares of the Corporation beneficially owned by and registered in the name of each shareholder. State the amount of authorized capital of the corporation and the amount of authorized capital represented by each class of shares. Also state whether each class is voting or non-voting. Any non-resident partnership or corporation applying for a Certificate of Practice to practice architecture in New Brunswick shall satisfy the Council that the majority of the issued shares of each class of voting shares of the corporation are beneficially owned by and registered in the name of architects and engineers.

Shareholders	Percentage of Ownership		
	Class	Class	Class
TOTAL NUMBER OF SHARES:			

SECTION 4

Name the Registered/Reciprocal Members authorized to affix a stamp on a design on behalf of the applicant in accordance with the New Brunswick Architects Act.

SECTION 5

DECLARATION

- I/WE as holder of a Certificate of Practice agree to comply with the New Brunswick Architects Act and By-laws of the Association.
- I/WE agree that only those individuals named in Section 4 of this application shall be authorized to affix the stamp and to sign the designs.
- I/WE hereby certify that the listing of principals/partners/directors in Section 2, and in the case of corporations, shareholder information, provided in Section 3, of this application is correct.
- I/WE enclose herewith payment in the amount of \$ _____ which represents the total fees required (administration fee and certificate of practice fee as calculated below plus reinstatement fee if applicable.)

The one-time administration fee of \$250.00 + \$37.50 HST = \$287.50 per completed Certificate of Practice application. Should your application not be approved, the administration fee is not refunded.

The Certificate of Practice annual fee is calculated at the rate of \$620.00 + \$93.00 HST = \$713.00 for each principal, partner, officer or director responsible for the practice of architecture listed in Section 2, and each person authorized to affix a stamp on behalf of the Certificate holder listed in Section 4, where these names differ.

All Fees must accompany the completed application form.

- I/WE understand this application will be considered **only** if it is complete in all respects, and is accompanied by, in the case of a Corporation, the firm’s articles of incorporation, and by a simple letterhead in compliance with the requirements regarding styling of letterhead.
- I/WE enclose herewith a **currently dated** ‘Certificate of Insurance’ as evidence of mandatory professional liability insurance coverage.

Registered Member Name: _____

Signature: _____ Date: _____

In the case of a joint venture, applicants shall file with the application for a Certificate of Practice a memorandum summarizing the joint venture and the members thereof.