



APPLICATION FOR CERTIFICATE OF AUTHORIZATION

SECTION I: GENERAL INFORMATION

1. Application for authorization to practice: Engineering Only Architecture Only Engineering and Architecture

2. _____
Legal Name of Organization

3. _____
Alternate Names (DBAs, Trade Names, etc.)

4. _____
Mailing Address

City, State, Zip Code

Email Address

Telephone

ext

Fax

SECTION II: ENGINEERING AND/OR ARCHITECTURE AUTHORITY

If the organization desires authorization to practice both engineering and architecture, complete and sign both signature blocks.

1. I, _____, am authorized by _____ as the
Name of Engineer *Name of Organization*

individual in responsible charge for the organization in its practice of **engineering** within the State of Nebraska. I certify that I regularly perform services for this organization, that the information presented on this application and any attachments is true and complete as of this date, and that any change in my status will be filed with the Board of Engineers and Architects within 30 days of the effective date of the change.

Signature of Engineer

NE License or Temporary Permit #

Date

2. I, _____, am authorized by _____ as the
Name of Architect *Name of Organization*

individual in responsible charge for the organization in its practice of **architecture** within the State of Nebraska. I certify that I regularly perform services for this organization, that the information presented on this application and any attachments is true and complete as of this date, and that any change in my status will be filed with the Board of Engineers and Architects within 30 days of the effective date of the change.

Signature of Architect

NE License or Temporary Permit #

Date

SECTION III: SIZE OF ORGANIZATION

Provide the number of licensed architects and professional engineers regularly performing professional services for the organization by checking the box next to the corresponding number. Do not count licensees who do not regularly perform services for the organization.

Licensed employees – ALL OFFICE LOCATIONS

Nebraska-licensed architects: _____

Nebraska-licensed professional engineers: _____

Architects licensed in other jurisdictions: _____

Professional engineers licensed in other jurisdictions: _____

Total # of licensed employees: _____

# OF LICENSEES	CHECK ONE	CERT. OF AUTH. FEE
1-5	<input type="checkbox"/>	\$100
6-10	<input type="checkbox"/>	\$200
11-49	<input type="checkbox"/>	\$300
50+	<input type="checkbox"/>	\$400

