

## 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

