



STATE OF CONNECTICUT
 DEPARTMENT OF CONSUMER PROTECTION
 OCCUPATIONAL & PROFESSIONAL LICENSING DIVISION
 Telephone: (860) 713-6135
 Email: dcp.occupationalprofessional@ct.gov
 Web Site: www.ct.gov/dcp

APPLY ONLINE

For your convenience, we allow credit card payments.
 Start yours at: www.ct.gov/dcp/apply

APPLICATION FOR JOINT PRACTICE OF ARCHITECTURE, LANDSCAPE ARCHITECTURE, PROFESSIONAL ENGINEERING, & LAND SURVEYING

This application **must be accompanied with a check or money order in the amount of \$565.00 made payable to "Treasurer, State of Connecticut", and returned to:**

**Department of Consumer Protection, License Services Division
 450 Columbus Boulevard, Ste 801, Hartford, CT 06103**

Please check (✓) the license types which your Corporation or Limited Liability Company practices:

- Architecture
 Landscape Architecture
 Professional Engineering
 Land Surveying

INSTRUCTIONS

- Persons licensed as architects, landscape architects, professional engineers, or land surveyors must own not less than two-thirds of the voting stock or voting interest of the corporation or limited liability company.
- Each profession must own a minimum of twenty percent of the voting stock or voting interest of the company.

PRIMARY EMAIL ADDRESS

Please list the primary email address to be used for all communication regarding this document, such as approval, rejection, and renewal notification:

Name of Corporation or Limited Liability Company			
Street Address	City	State	Zip Code
Telephone Number (with area code)	FEIN		
Mailing Address (if different from above)			
Street Address	City	State	Zip Code
State of Incorporation	Business ID# issue by the Connecticut Secretary of State		
Has the applicant or any of the directors, officers, members or managers been convicted of a felony crime? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please attach a statement providing the dates(s) of conviction(s), the court(s) where the cases were decided and a description of the circumstances relating to each conviction(s).			
Indicate Organizational Structure: <input type="checkbox"/> Corporation <input type="checkbox"/> Professional Corporation (PC) <input type="checkbox"/> Limited Liability Company (LLC)			

FOR CORPORATION, PROFESSIONAL CORPORATION OR LIMITED LIABILITY COMPANY

List the names, addresses and titles of all directors, officers, managers or members

Name	Address	Title	CT License Number
Name	Address	Title	CT License Number
Name	Address	Title	CT License Number
Name	Address	Title	CT License Number

HOLDERS OF VOTING STOCK OR VOTING INTEREST

Name	Address	Voting Shares	CT License Number
Name	Address	Voting Shares	CT License Number
Name	Address	Voting Shares	CT License Number
Name	Address	Voting Shares	CT License Number

TOTAL VOTING SHARES ISSUED _____

LIST ALL PERSONNEL IN RESPONSIBLE CHARGE WHO ACT ON BEHALF OF THE CORPORATION OR LLC AS AN ARCHITECT, LANDSCAPE ARCHITECT, PROFESSIONAL ENGINEER, OR LAND SURVEYOR WHO HOLD CONNECTICUT LICENSES

Name	Address	CT License Number
Name	Address	CT License Number
Name	Address	CT License Number
Name	Address	CT License Number
Name	Address	CT License Number
Name	Address	CT License Number

I, the director or officer of the corporation or member or manager of the limited liability company on behalf of which the above application is made, being duly sworn according to law depose and say the answers above set forth are true to the best of my knowledge and belief and that this application is made for the purpose of inducing the issuance of the registration requested.

Signature

Title

Date

Subscribed and sworn to before me this _____ day of _____ 20_____

Signature of Notary Public

Date

My Commission Expires