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**VIRTUAL/TELECONFERENCE  
ARCHITECT SECTION  
EXAMINING BOARD OF ARCHITECTS, LANDSCAPE ARCHITECTS,  
PROFESSIONAL ENGINEERS, DESIGNERS, AND  
PROFESSIONAL LAND SURVEYORS  
Virtual, 4822 Madison Yards Way, Madison  
Contact: Adam Barr (608) 266-2112  
October 6, 2021**

*The following agenda describes the issues that the Section plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a record of the actions of the Section.*

**AGENDA**

**9:00 A.M.**

**OPEN SESSION – CALL TO ORDER – ROLL CALL**

- A. Adoption of Agenda (1-3)**
- B. Approval of Minutes of June 29, 2021 (4-5)**
- C. Introductions, Announcements and Recognition
- D. Reminders: Conflicts of Interest, Scheduling Concerns
- E. Administrative Matters**
  - 1) Department, Staff and Board Updates
  - 2) Board Member – Term Expiration Dates
    - a. Douglas, Gregory A. – 7/1/2023
    - b. Gersich, A. James – 7/1/2015
    - c. Wagner, Steven L – 7/1/2021
- F. Legislative and Policy Matters – Discussion and Consideration
- G. Administrative Rule Matters – Discussion and Consideration (6-7)**
  - 1) Pending and Possible Rulemaking Projects
    - a. Possible Scope Statement Revising the Definition of Supervision (A-E 8)
- H. Update on Request for Credential Verification of Architect Licensees Submitting Plan Reviews (8)**
- I. Review and Discussion of the Architect Certification of Authorization Application and Renewal Forms for Consistency with State Law (9-15)**

**J. Discussion and Consideration of Items Added After Preparation of Agenda:**

- 1) Introductions, Announcements and Recognition
- 2) Administrative Matters
- 3) Election of Officers
- 4) Appointment of Liaisons and Alternates
- 5) Delegation of Authorities
- 6) Education and Examination Matters
- 7) Credentialing Matters
- 8) Practice Matters
- 9) Legislative and Policy Matters
- 10) Administrative Rule Matters
- 11) Liaison Reports
- 12) Board Liaison Training and Appointment of Mentors
- 13) Informational Items
- 14) Division of Legal Services and Compliance (DLSC) Matters
- 15) Presentations of Petitions for Summary Suspension
- 16) Petitions for Designation of Hearing Examiner
- 17) Presentation of Stipulations, Final Decisions and Orders
- 18) Presentation of Proposed Final Decisions and Orders
- 19) Presentation of Interim Orders
- 20) Petitions for Re-Hearing
- 21) Petitions for Assessments
- 22) Petitions to Vacate Orders
- 23) Requests for Disciplinary Proceeding Presentations
- 24) Motions
- 25) Petitions
- 26) Appearances from Requests Received or Renewed
- 27) Speaking Engagements, Travel, or Public Relation Requests, and Reports

**K. Public Comments**

**CONVENE TO CLOSED SESSION to deliberate on cases following hearing (s. 19.85(1)(a), Stats.); to consider licensure or certification of individuals (s. 19.85(1)(b), Stats.); to consider closing disciplinary investigations with administrative warnings (ss. 19.85(1)(b), and 440.205, Stats.); to consider individual histories or disciplinary data (s. 19.85(1)(f), Stats.); and to confer with legal counsel (s. 19.85(1)(g), Stats.).**

**L. Deliberation on Division of Legal Services and Compliance (DLSC) Matters**

- 1) Stipulations, Final Decisions and Orders
  - a. 18 ARC 010 – Stephen P. Smith, Stephen Perry Smith Architects, Inc. **(16-22)**
- 2) Administrative Warnings
  - a. 18 ARC 018 – M.R.P. **(23-25)**
  - b. 19 ARC 017, 20 ARC 005 – J.D.G. **(26-27)**

**M. Deliberation on Matters Relating to Costs/Orders Fixing Costs**

- 1) Paul C. Grimes – DHA Case Number SPS-18-0056/DLSC Case Number 17 ARC 019 **(28-45)**

**N. Deliberation of Items Added After Preparation of the Agenda**

- 1) Education and Examination Matters
- 2) Credentialing Matters
- 3) DLSC Matters

- 4) Monitoring Matters
- 5) Professional Assistance Procedure (PAP) Matters
- 6) Petitions for Summary Suspensions
- 7) Petitions for Designation of Hearing Examiner
- 8) Proposed Stipulations, Final Decisions and Order
- 9) Proposed Interim Orders
- 10) Administrative Warnings
- 11) Review of Administrative Warnings
- 12) Proposed Final Decisions and Orders
- 13) Matters Relating to Costs/Orders Fixing Costs
- 14) Case Closings
- 15) Board Liaison Training
- 16) Petitions for Assessments and Evaluations
- 17) Petitions to Vacate Orders
- 18) Remedial Education Cases
- 19) Motions
- 20) Petitions for Re-Hearing
- 21) Appearances from Requests Received or Renewed

O. Consulting with Legal Counsel

**RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION**

P. Vote on Items Considered or Deliberated Upon in Closed Session if Voting is Appropriate

Q. Open Session Items Noticed Above Not Completed in the Initial Open Session

**ADJOURNMENT**

**NEXT MEETING: TO BE DETERMINED (2022)**

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 MEETINGS AND HEARINGS ARE OPEN TO THE PUBLIC, AND MAY BE CANCELLED WITHOUT NOTICE.

Times listed for meeting items are approximate and depend on the length of discussion and voting. All meetings are held at 4822 Madison Yards Way, Madison, Wisconsin, unless otherwise noted. In order to confirm a meeting or to request a complete copy of the board's agenda, please call the listed contact person. The board may also consider materials or items filed after the transmission of this notice. Times listed for the commencement of disciplinary hearings may be changed by the examiner for the convenience of the parties. Requests for interpreter services for the deaf or hard of hearing, or other accommodations, are considered upon request by contacting the Affirmative Action Officer, 608-266-2112, or the Meeting Staff at 608-266-5439.

**VIRTUAL/TELECONFERENCE  
ARCHITECT SECTION  
EXAMINING BOARD OF ARCHITECTS, LANDSCAPE ARCHITECTS  
PROFESSIONAL ENGINEERS, DESIGNERS AND  
PROFESSIONAL LAND SURVEYORS  
MEETING MINUTES  
JUNE 29, 2021**

**PRESENT:** Gregory Douglas, James Gersich, Steven Wagner

**STAFF:** Adam Barr, Executive Director; Jon Derenne, Legal Counsel; Kimberly Wood, Program Assistant Supervisor-Adv.; and other Department Staff

**CALL TO ORDER**

Steven Wagner, Chairperson, called the meeting to order at 1:08 p.m. A quorum was confirmed with three (3) members present.

**ADOPTION OF AGENDA**

**MOTION:** James Gersich moved, seconded by Gregory Douglas, to adopt the Agenda as published. Motion carried unanimously.

**APPROVAL OF MINUTES OF APRIL 14, 2021**

**MOTION:** James Gersich moved, seconded by Gregory Douglas, to approve the Minutes from April 14, 2021 as published. Motion carried unanimously.

**CLOSED SESSION**

**MOTION:** James Gersich moved, seconded by Gregory Douglas, to convene to closed session to deliberate on cases following hearing (s. 19.85(1)(a), Stats.); to consider licensure or certification of individuals (s. 19.85(1)(b), Stats.); to consider closing disciplinary investigations with administrative warnings (ss. 19.85 (1)(b), and 440.205, Stats.); to consider individual histories or disciplinary data (s. 19.85(1)(f), Stats.); and to confer with legal counsel (s. 19.85(1)(g), Stats.). Steven Wagner, Chairperson, read the language of the motion. The vote of each member was ascertained by voice vote. Roll Call Vote: Gregory Douglas-yes; James Gersich-yes; and Steven Wagner-yes. Motion carried unanimously.

The Section convened into Closed Session at 1:15 p.m.

## CREENTIALING MATTERS

### Application Review

#### *Novus Architects, Inc.*

**MOTION:** Gregory Douglas moved, seconded by James Gersich, to approve the application of Novus Architects, Inc., for Certificate of Authorization for an Architectural Firm, once all requirements are met. Motion carried unanimously.

#### **RECONVENE TO OPEN SESSION**

**MOTION:** James Gersich moved, seconded by Gregory Douglas, to reconvene into Open Session. Motion carried unanimously.

The Section reconvened into Open Session at 1:38 p.m.

#### **VOTING ON ITEMS CONSIDERED OR DELIBERATED IN CLOSED SESSION**

**MOTION:** James Gersich moved, seconded by Gregory Douglas, to affirm all motions made and votes taken in Closed Session. Motion carried unanimously.

*(Be advised that any recusals or abstentions reflected in the closed session motions stand for the purposes of the affirmation vote.)*

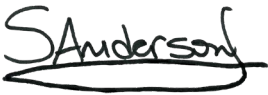
#### **ADJOURNMENT**

**MOTION:** James Gersich moved, seconded by Gregory Douglas, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 1:40 p.m.

**State of Wisconsin  
Department of Safety & Professional Services**

**AGENDA REQUEST FORM**

<b>1) Name and title of person submitting the request:</b> Sofia Anderson – Administrative Rules Coordinator		<b>2) Date when request submitted:</b> 09/23/2021 Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting	
<b>3) Name of Board, Committee, Council, Sections:</b> Architect Section of the Architects, Landscape Architects, Professional Engineers, Designers, and Professional Land Surveyors Examining Board			
<b>4) Meeting Date:</b> October 6, 2021	<b>5) Attachments:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>6) How should the item be titled on the agenda page?</b> Administrative Rules Matters – Discussion and Consideration 1. Pending and Possible Rulemaking Projects	
<b>7) Place Item in:</b> <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	<b>8) Is an appearance before the Board being scheduled?</b> <i>(If yes, please complete <a href="#">Appearance Request</a> for Non-DSPS Staff)</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>9) Name of Case Advisor(s), if required:</b> N/A	
<b>10) Describe the issue and action that should be addressed:</b> Attachments: 1. October 2021 Architect Section report.			
<b>11) Authorization</b> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"> <div style="text-align: center;">   <hr/>                 Signature of person making this request             </div> <div style="text-align: center;">                 09/23/2021  <hr/>                 Date             </div> </div> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 10px;"> <div style="width: 60%;"> <hr/>                 Supervisor (if required)             </div> <div style="width: 35%;"> <hr/>                 Date             </div> </div> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 10px;"> <div style="width: 70%;"> <hr/>                 Executive Director signature (indicates approval to add post agenda deadline item to agenda)             </div> <div style="width: 25%;"> <hr/>                 Date             </div> </div>			
<b>Directions for including supporting documents:</b> 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

**Architect Section of the A-E Examining Board  
Rule Projects (updated 09/29/21)**

Clearinghouse Rule Number	Scope #	Scope Expiration	Code Chapter Affected	Relating clause/ Summary	Current Stage	Next Step
21-020	080-19	2/19/2022	A-E 2	General requirements and procedures. Amendments to ensure requirements are current with standards of practice and consistent with Statutes. Update to ensure compliance with 2017 Act 108.	Signed final rule draft, legislative report, and EIA were sent to Governor's office on 9/20/21.	Once we receive the Governor's approval, the final rule draft and legislative report will be sent to the chief clerks of both houses of the Legislature.
21-019	082-19	2/19/2022	A-E 8	Professional Conduct Update to ensure compliance with 2017 Act 108.	Signed final rule draft, legislative report, and EIA were sent to Governor's office on 9/20/21.	Once we receive the Governor's approval, the final rule draft and legislative report will be sent to the chief clerks of both houses of the Legislature.
			A-E 2, 7, and 8	Clarification on definitions of seal and stamps, requirements for electronic signatures, and clean up redundant words or sentences.	Scope was drafted and is ready to be presented at the October meeting.	If approved by the board at the October meeting, the Scope will be submitted to the Governor's office for approval.
19-151	081-19	2/19/2022	A-E 3	Architect Registration Examination. In response to the Act 108 report, correcting outdated exam provisions	Rule effective 6/1/2021	
20-064	036-20	11/11/2022	A-E 1 to 13	Retired Credential Status. Establish retired credential status in compliance with 2019 Act 94.	Rule effective 6/1/2021	

**State of Wisconsin  
Department of Safety & Professional Services**

**AGENDA REQUEST FORM**

<b>1) Name and title of person submitting the request:</b> Jon Derenne, Attorney		<b>2) Date when request submitted:</b> September 23, 2021 <small>Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting</small>	
<b>3) Name of Board, Committee, Council, Sections:</b> Architect Section			
<b>4) Meeting Date:</b> October 6, 2021	<b>5) Attachments:</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>6) How should the item be titled on the agenda page?</b> Update on request for credential verification of architect licensees submitting plan reviews.	
<b>7) Place Item in:</b> <input type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	<b>8) Is an appearance before the Board being scheduled?</b> <i>(If yes, please complete <a href="#">Appearance Request</a> for Non-DSPS Staff)</i>  <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>9) Name of Case Advisor(s), if required:</b>	
<b>10) Describe the issue and action that should be addressed:</b>			
<b>11) Authorization</b>			
<i>Jon Derenne</i>		September 23, 2021	
<b>Signature of person making this request</b>		<b>Date</b>	
<b>Supervisor (if required)</b>		<b>Date</b>	
<b>Executive Director signature (indicates approval to add post agenda deadline item to agenda)    Date</b>			
<b>Directions for including supporting documents:</b> 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			



**State of Wisconsin  
Department of Safety & Professional Services**

**AGENDA REQUEST FORM**

<b>1) Name and title of person submitting the request:</b> Jon Derenne, Attorney		<b>2) Date when request submitted:</b> September 23, 2021 <small>Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting</small>	
<b>3) Name of Board, Committee, Council, Sections:</b> Architect Section			
<b>4) Meeting Date:</b> October 6, 2021	<b>5) Attachments:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>6) How should the item be titled on the agenda page?</b> Review and discussion of the architect certificate of authorization application and renewal forms for consistency with state law.	
<b>7) Place Item in:</b> <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	<b>8) Is an appearance before the Board being scheduled?</b> <i>(If yes, please complete <a href="#">Appearance Request</a> for Non-DSPS Staff)</i>  <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>9) Name of Case Advisor(s), if required:</b>	
<b>10) Describe the issue and action that should be addressed:</b> Discuss possible changes needed to forms 476 and 929 to make them consistent with each other and applicable state law regarding who must sign and seal a COA initial application and/or renewal form.			
<b>11) Authorization</b>			
<i>Jon Derenne</i>		September 23, 2021	
<b>Signature of person making this request</b>		<b>Date</b>	
<b>Supervisor (if required)</b>		<b>Date</b>	
<b>Executive Director signature (indicates approval to add post agenda deadline item to agenda)    Date</b>			
<b>Directions for including supporting documents:</b> 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

# Wisconsin Department of Safety and Professional Services

**Mail To:** P.O. Box 8935  
Madison, WI 53708-8935  
**FAX #:** (608) 251-3036  
**Phone #:** (608) 266-2112

**Office Location:** 4822 Madison Yards Way  
Madison, WI 53705  
**E-Mail:** [dspd@wisconsin.gov](mailto:dspd@wisconsin.gov)  
**Website:** <http://dspd.wi.gov>

## EXAMINING BOARD OF ARCHITECTS, LANDSCAPE ARCHITECTS, PROFESSIONAL ENGINEERS, DESIGNERS, AND PROFESSIONAL LAND SURVEYORS

### INFORMATION FOR APPLICATION FOR CERTIFICATE OF AUTHORIZATION

Wis. Stat. § 443.08 requires that firms, partnerships, or corporations practicing architecture, professional engineering, or design of engineering systems obtain a Certificate of Authorization (COA) issued by the appropriate section of the Examining Board of Architects, Landscape Architects, Professional Engineers, Designers and Professional Land Surveyors.

Complete and return the Application for Certificate of Authorization (**Form #476**) with the application fee made payable to the Department of Safety and Professional Services to the address shown above.

Any changes in the information provided on this application during the registration period must be reported in writing within 30 days of the effective date. Please include the credential number in all correspondence. Correspondence should be addressed to the Examining Board at the address shown above. Any change in ownership requires a new application to be completed.

In addition to the credential issued by the appropriate section of the Examining Board of Architects, Landscape Architects, Professional Engineers, Designers, and Professional Land Surveyors, a corporation and certain other types of business entities must register with the Department of Financial Institutions. You must contact that agency directly to obtain the registration material. The mailing address and telephone number is Department of Financial Institutions, Division of Corporations and Consumer Services, P.O. Box 7846, Madison, Wisconsin 53707, (608) 261-7577. **You may file with the Examining Board of Architects, Landscape Architects, Professional Engineers, Designers, and Professional Land Surveyors and the Department of Financial Institutions concurrently.**

# Wisconsin Department of Safety and Professional Services

**Mail To:** P.O. Box 8935  
 Madison, WI 53708-8935  
**FAX #:** (608) 251-3036  
**Phone #:** (608) 266-2112

**Office Location:** 4822 Madison Yards Way  
 Madison, WI 53705  
**E-Mail:** [dsps@wisconsin.gov](mailto:dsps@wisconsin.gov)  
**Website:** <http://dsps.wi.gov>

## EXAMINING BOARD OF ARCHITECTS, LANDSCAPE ARCHITECTS, PROFESSIONAL ENGINEERS, DESIGNERS, AND PROFESSIONAL LAND SURVEYORS

### APPLICATION FOR CERTIFICATE OF AUTHORIZATION

The Department must deny your application if you are liable for delinquent state taxes, UI contributions, or child support (Wis. Stat. §§ 440.12 and 440.13).

PLEASE TYPE OR PRINT IN INK

Your name, street address, phone number, and e-mail address are available to the public. Check box to withhold street address/PO Box, phone number, and e-mail address from lists of 10 or more credential holders (Wis. Stat. § 440.14).

Name of Firm, Partnership, or Corporation

Mailing Address (street, city, state, zip code)

Daytime Telephone Number

 -  - 

FEIN Number

 - 

Your Social Security Number or Employer Identification Number must be submitted with your application on this form. If you do not have a Social Security Number, you must complete Form #1051. The Department may not disclose the Social Security Number collected except as authorized by law.

Please check applicable box(s) to indicate the professional services that apply to the firm that is seeking authorization. **Note: There must be a Wisconsin credential holder employed by the firm for each profession checked.**

- Architecture       Design of Engineering Systems (must have a WI licensed Designer of Engineering Systems) **Indicate Subfield:**  
 Professional Engineering       Electrical       Fire Protection       HVAC       Plumbing       Private Sewage Systems

E-mail Address

Most types of business entities (including those formed under the laws of another state or country) must file documents with the Wisconsin Department of Financial Institutions (DFI). To confirm your status, you must first contact DFI at (608) 261-7577 or at [www.wdfi.org/corporations](http://www.wdfi.org/corporations), then **check one** of the statements below:

- The Business Entity identified above is required by law to file documents with the Department of Financial Institutions in order to engage in business in Wisconsin and I certify that the documents have been filed, as required, and that the Business Entity has met current legal requirements to engage in business in Wisconsin, and has completed the Convictions and Pending Charges (**Form #2252**), if applicable.
- The Business Entity identified above **has not filed documents**, as described above, with another Wisconsin agency, because the Business Entity is not required to do so.

Address of Branch Office A (street, city, state, zip code)

Daytime Telephone Number

 -  - 

Address of Branch Office B (street, city, state, zip code)

Daytime Telephone Number

 -  - 

**APPLICATION FEES: Please check applicable box. Make check payable to DSPS and attach to this application. To pay by credit card see [Form 3071](#).**

- Initial Certificate of Authorization**  
 \$55.00 Credential Fee Attached
- Late Renewal** (credential expired more than 5 years)  
 \$ 55.00 Renewal Fee  
 \$ 25.00 Late Renewal Fee  
 \$ 80.00 Total Fee Attached

**For Receiving Use Only (11)**

# Wisconsin Department of Safety and Professional Services

**RENEWAL REQUIREMENTS:** Please view the Department website at <http://dsps.wi.gov> and select "Professions," then the hyperlink for this profession.

**ANSWER THE FOLLOWING QUESTIONS** (Attach additional sheets if necessary.)

1.	Has the firm, partnership, or corporation or any of its officers ever surrendered, resigned, canceled, or been denied a professional license or other credential in Wisconsin, or any other jurisdiction? <b>If yes, give details on an attached sheet, including the name of the profession and the agency.</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.	Has any licensing or other credentialing agency ever taken any disciplinary action against the firm, partnership, or corporation or any of its officers, including but not limited to any warning, reprimand, suspension, probation, limitation, or revocation? <b>If yes, attach a sheet providing details about the action, including the name of the credentialing agency and date of action.</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.	Is disciplinary action pending against the firm, partnership, or corporation or any of its officers in any jurisdiction? <b>If yes, attach a sheet providing details about pending action, including the name of the agency and status of action.</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.	Has the firm, partnership, or corporation or any of its officers ever been convicted of a misdemeanor, felony, or other violation of federal, state, or local law or does the firm, partnership, or corporation or any of its officers have any felony, misdemeanor, or other violation of federal, state, or local law charges pending against them in this state or any other? This includes municipal ordinances resulting only in monetary fines or forfeitures and convictions resulting from a plea of no contest, a guilty plea, or verdict. <b>If yes, submit Convictions and Pending Charges (Form #2252).</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.	Is the firm, partnership, or corporation or any of its officers registered or licensed in any other profession(s)? <b>If yes, state what profession(s) and in what state(s):</b>  <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.	Has the firm, partnership, or corporation or any of its officers ever been credentialed under any other name(s)? <b>If yes, state name(s) credentialed under:</b>  <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Provide the name and addresses of all officers, directors, members, or partners of the firm, partnership, or corporation. (Attach additional sheets, if necessary)**

**Title/Position**

**Name**

**Home Address** (street, city, state, zip code)

**Provide the names, credential type (Architect, Professional Engineer, or Designer of Engineering Systems), credential numbers, and branch office locations of the Wisconsin credential holders employed by the firm, partnership, or corporation who will be in responsible charge of the work performed in Wisconsin. (Attach additional sheets, if necessary.)**

**Name**

**Credential Type**

**Credential Number**

**Address** (street, city, state, zip code)

**Each Wisconsin credential holder employed by the firm, partnership, or corporation listed above must sign the application and emboss their personal registration seal attesting to their employment by the firm, partnership, or corporation and that they will be in responsible charge of the services provided in Wisconsin.**

# Wisconsin Department of Safety and Professional Services

I certify that I am employed by the firm, partnership, or corporation named on this application (**Form #476**) and that I will be in responsible charge of architecture, professional engineering, or design of engineering systems practice in Wisconsin through said firm, partnership, or corporation, as authorized by my credential issued by the Wisconsin Examining Board of Architects, Landscape Architects, Professional Engineers, Designers and Professional Land Surveyors. (Attach additional sheets if necessary.)

**Signature:**   
(Print and Sign Form)

**Date:**   /   /     WI SEAL

**Signature:**   
(Print and Sign Form)

**Date:**   /   /     WI SEAL

**Signature:**   
(Print and Sign Form)

**Date:**   /   /     WI SEAL

**Signature:**   
(Print and Sign Form)

**Date:**   /   /     WI SEAL

## **SIGNATURE OF FIRM REPRESENTATIVE:**

I further certify that I have the authority to complete this form on behalf of the firm, partnership, or corporation and that the information on this application for a certificate of authorization is true and complete.

## **CONTINUING DUTY OF DISCLOSURE:**

I understand that I have a continuing duty of disclosure during the application process. If information I have provided in this application becomes invalid, incorrect, or outdated, I understand that I am obliged to provide any necessary information to ensure the information on my application remains current, valid, and truthful. I understand that credentialing authorities may view acts of omission as dishonesty and that my duty of disclosure during the application process exists until licensure is granted or denied.

By signing below, I am signifying that I have read the above statements (Continuing Duty of Disclosure) and understand the obligation I have as an applicant or credential-holder should information I have provided to the Department of Safety and Professional Services change.

I understand if I provide false information on this form, that the certificate of authorization may be revoked or suspended.

**Signature of Firm Representative:** (Print and Sign Form)

**Date:**

/   /

**Title of Firm Representative**

**Printed Name**

**Home Address** (street, city, state, zip code)

**Contact Person** (if different from person signing **Form #476**)

**E-mail Address**

**Daytime Phone Number**

-     -

# Wisconsin Department of Safety and Professional Services

Mail To: P.O.Box 8935  
Madison, WI 53708-8935

FAX #: (608) 251-3036  
Phone #: (608) 266-2112

4822 Madison Yards Way  
Madison, WI 53705  
E-Mail: DSPSRenewal@wi.gov  
Website: <http://dsps.wi.gov>

## DIVISION OF PROFESSIONAL CREDENTIAL PROCESSING

### REPORT OF RENEWAL INFORMATION FOR CERTIFICATE OF AUTHORIZATION

Certificates of Authorization to practice architecture, professional engineering, or design of engineering systems as a corporation must be renewed before February 1<sup>st</sup> of every even numbered year. To renew, corporate certificate holders must return this report of renewal information for certificate of authorization. Please mail to PO Box 8935, Madison, WI 53708 or fax to (608) 251-3036. A late filing fee is required for all renewals received after the expiration date.

1. Registration number \_\_\_\_\_

2. Corporation name \_\_\_\_\_

Check here if this is a change from that shown on the renewal application.

Previous name \_\_\_\_\_

3. Mailing address \_\_\_\_\_

**NOTE: If the corporation name or mailing address differs from that on the renewal application, the change must be recorded on both this form and the renewal application.**

4. Names and addresses of all officers and directors of the corporation:

<u>Name</u>	<u>Address</u>	<u>Title</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

5. Addresses of all branch offices located in Wisconsin:

\_\_\_\_\_  
\_\_\_\_\_

6. The certificate of authorization should include authorization to provide the following professional services through registered persons (check all that apply).

Architecture       Professional Engineering       Design of Engineering Systems

7. All licensed employees of a corporation licensed in any of above professions in Wisconsin, must complete the Certificate on the back of this form. All licensees are required to possess a personal seal pursuant to Wis. Admin. Code § A-E 2. The seal, name, profession, registration number, address and signature must be included in the Certificate. (Attach additional pages if necessary.) Please specify if licensee should be listed as Responsible/in charge licensee for company.

8. Any changes in the above information during the two-year registration period must be reported in writing to the Department of Safety and Professional Services, Division of Professional Credential Processing, P.O. Box 8935, Madison, WI 53708.

9. Name \_\_\_\_\_

Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

(Print and Sign Form)

# Wisconsin Department of Safety and Professional Services

## CERTIFICATE

I certify that I am employed by \_\_\_\_\_  
(name of corporation)

and that I have a current license in architecture, professional engineering, or design of engineering systems which is being practiced in Wisconsin through said corporation.

(SEAL)

Responsible licensee    \_\_\_ Yes    \_\_\_ No

Name \_\_\_\_\_  
Profession \_\_\_\_\_  
Registration Number \_\_\_\_\_  
Address \_\_\_\_\_

SIGNATURE \_\_\_\_\_  
(Print and Sign Form)

(SEAL)

Responsible licensee    \_\_\_ Yes    \_\_\_ No

Name \_\_\_\_\_  
Profession \_\_\_\_\_  
Registration Number \_\_\_\_\_  
Address \_\_\_\_\_

SIGNATURE \_\_\_\_\_  
(Print and Sign Form)

(SEAL)

Responsible licensee    \_\_\_ Yes    \_\_\_ No

Name \_\_\_\_\_  
Profession \_\_\_\_\_  
Registration Number \_\_\_\_\_  
Address \_\_\_\_\_

SIGNATURE \_\_\_\_\_  
(Print and Sign Form)

(SEAL)

Responsible licensee    \_\_\_ Yes    \_\_\_ No

Name \_\_\_\_\_  
Profession \_\_\_\_\_  
Registration Number \_\_\_\_\_  
Address \_\_\_\_\_

SIGNATURE \_\_\_\_\_  
(Print and Sign Form)

(SEAL)

Responsible licensee    \_\_\_ Yes    \_\_\_ No

Name \_\_\_\_\_  
Profession \_\_\_\_\_  
Registration Number \_\_\_\_\_  
Address \_\_\_\_\_

SIGNATURE \_\_\_\_\_  
(Print and Sign Form)

(SEAL)

Responsible licensee    \_\_\_ Yes    \_\_\_ No

Name \_\_\_\_\_  
Profession \_\_\_\_\_  
Registration Number \_\_\_\_\_  
Address \_\_\_\_\_

SIGNATURE \_\_\_\_\_  
(Print and Sign Form)