

OREGON STATE BOARD OF ARCHITECT EXAMINERS 205 LIBERTY STREET NE, SUITE A SALEM, OR 97301 503.763.0662

www.oregon.gov/osbae architectboard@osbae.oregon.gov

## ARCHITECTURAL FIRM NAME CHANGE APPLICATION

Use this application for name changes and DBA additions of registered firms only.

For Firm Type changes use the Architectural Firm Application.

Submit this form with a current Certificate of Existence from the Oregon Secretary of State.

OLD FIRM NAME					
OLD DBA, IF APPLICABLE, as it a	appears on your regist	ration documents			
REGISTRATION NUMBER	ARF-				
NEW FIRM NAME					
NEW DBA, if applicable					
FIRM REPRESENTATIVE NAME of firm, or have ownership interest	-	tive must be an officer or	voting membe	er of the arch	iitectural
FIRM ADDRESS					
FIRM CITY, STATE, ZIP					
MAILING ADDRESS, if different					
MAILING CITY, STATE, ZIP					
FIRM REPRESENTATIVE PHONE NUMBER			WORK	HOME	CELL
FIRM REPRESENTATIVE E-MAIL	ADDRESS				
Oregon Registered Architect(s) NAME	with responsible cont	rol of the provision of arc	chitectural serv ARI-	rices in Orego	on:
NAME			ARI-		
NAME			ARI-		
REASON FOR CHANGING FIRM	NAME				
I certify that I am an officer or value above is true and correct.	voting member of the f	firm, or have ownership i	nterest, and th	e informatio	n
Signature of Firm Renresentative			Date		

For an updated Decorative Wall Certificate, please submit a Duplicate Registration Request Application.