



State of New Hampshire
 OFFICE OF PROFESSIONAL LICENSURE AND CERTIFICATION
 DIVISION OF TECHNICAL PROFESSIONS
Board of Architects
 7 Eagle Square, Concord, N.H. 03301-2412

NH ARCHITECT LICENSE RENEWAL FORM

Part I. LICENSEE INFORMATION

LICENSE EXPIRATION DATE _____ AMOUNT DUE _____

FULL NAME _____ LICENSE # _____

HOME ADDRESS _____

HOME PHONE _____

BUSINESS NAME & ADDRESS _____

WORK PHONE _____

Indicate mailing address by check box EMAIL ADDRESS _____

Part II. FEE SCHEDULE	CRITERIA	PAYMENT INFORMATION
<input type="checkbox"/> Renewal Fee \$150.00	Payable by last day of the month of licensee's birth.	Make check payable to "Treasurer, State of New Hampshire" OR use the enclosed credit card sheet
<input type="checkbox"/> Late fee \$30.00 per month	Include \$30.00 per month or fraction of a month the renewal is late.	
<input type="checkbox"/> \$30.00 - Retired Status	No longer receiving remuneration for architectural services; honorary status only.	

PART III. QUESTIONS	Include an explanation if "yes"	YES	NO
1. I have been found by a court or licensing/registration board to have violated the law in the conduct of my practice.		<input type="checkbox"/>	<input type="checkbox"/>
2. Have you ever had any sanctions or disciplinary action brought against you by any Board or Jurisdiction?		<input type="checkbox"/>	<input type="checkbox"/>

PART IV. CERTIFICATION

RULES OF PROFESSIONAL CONDUCT

I certify to the best of my understanding, knowledge and belief that I have adhered to and agree to abide by the ethical and professional standards of New Hampshire Code of Administrative Rules Arch 500; and

I attest that the information contained in this form is true and correct to the best of my knowledge and believe and acknowledge that the provision of false information in the application is a basis for disciplinary action by the board and I have complied with the continuing education requirements of Arch 403:

➔ SIGN HERE _____
 DATE _____

Renew on-line at <https://nhlicenses2.nh.gov/professional/>
 Find us on-line at www.oplc.nh.gov/architects/index.htm

Credit Card Sheets are not accepted via e-mail.

**Credit Card sheets can be faxed to 603-271-7928 or
mailed to Board of Architects, 7 Eagle Square, Concord NH 03301**

**You may pay your fee with a credit card by filling out this form.
This page will be destroyed after the transaction has taken place – Please
single sided use only**

Profession:		Amount Due:	
Licensee Name:		License Number:	
Card Type: (please select one)	<input type="checkbox"/> Visa	<input type="checkbox"/> Mastercard	(required)
Card Number:			(required)
Expiration Date:	Month:	Year:	(required)
Billing Name and Address (your billing address must match the address associated with the credit card you are using.)			
Name on Card:			
Billing Address:			
City:			
State/Province:			
Zip/Postal Code:			
Country:			
Authorization Signature :			

Rev. 1/10

DO NOT EMAIL THIS FORM