



**NEVADA STATE BOARD OF ARCHITECTURE, INTERIOR DESIGN & RESIDENTIAL DESIGN**

2080 E. Flamingo Rd., Suite 120  
Las Vegas, NV 89119

Phone: (702) 486-7300  
Fax: (702) 486-7304  
Email: [nsbaidrd@nsbaidrd.nv.gov](mailto:nsbaidrd@nsbaidrd.nv.gov)  
Web: [nsbaidrd.org](http://nsbaidrd.org)

Dear Registrant:

Enclosed is a Firm Fact Sheet and a Firm Registration/Firm Name Approval Form.

A minimum of two-thirds ownership must be held by Nevada registrants (licensed pursuant to NRS 623, NRS 623A or NRS 625) for businesses providing architectural, registered interior design, or residential design services in the state of Nevada. These firms must be registered with the Board of Architecture, Interior Design and Residential Design and the proposed firm name must be approved by the board.

Please submit a \$300 processing fee and a \$125 certificate of registration fee, for a total of \$425, with your completed paperwork. You will be notified by letter of the board's decision after its next scheduled meeting.

If you have any questions, please contact our office at (702) 486-7300.

Thank you,

NEVADA STATE BOARD OF ARCHITECTURE,  
INTERIOR DESIGN AND RESIDENTIAL DESIGN



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### Firm Fact Sheet

#### **What You Need to Know About Firm Registration and Firm Name Approval**

Nevada architects, registered interior designers, and residential designers may form business organizations with persons who are not design professionals, as well as with persons not registered in the state. These businesses can be formed if at least two-thirds of the ownership is held by Nevada registrants licensed pursuant to NRS 623, NRS 623A (landscape architects) or NRS 625 (professional engineers). Businesses engaging in the practice of architecture, registered interior design, or residential design, that are not wholly owned by Nevada registrants, must register with the board.

All business entities using corporate or fictitious names, and providing architectural, registered interior design, or residential design services in Nevada, must have their firm names approved by NSBAIDRD. Businesses requesting firm registration are automatically requesting firm name approval and do not need to submit any additional paperwork.

Businesses not owned by persons registered under NRS 623 are not required to register their firms with NSBAIDRD. Registrants and licensees from other design professional boards should contact their respective board for any firm registration requirements.

Additionally, all firms must comply with Nevada business laws. For information on setting up your business in the state, please contact the Nevada Secretary of State at (775) 684-5708.

**Firm registration** is necessary if:

- The partnership, corporation, company, etc. is owned partially by Nevada registered architects, interior designers, residential designers, professional engineers, and/or landscape architects; (IMPORTANT: Nevada registrants must own two-thirds - 66.67 percent - of the business entity.) AND
- The partnership, corporation, company, etc. is providing architectural, registered interior design, or residential design services.

**Firm name approval** is necessary if:

- The partnership, corporation, company, etc. is owned 100 percent by Nevada registered architects, interior designers, residential designers, professional engineers, and/or landscape architects; AND
- The partnership, corporation, company, etc. is providing architectural, registered interior design, or residential design services; AND
- The partnership, corporation, company, etc. is doing business under a fictitious name.

You do **not** need to register your business or have your firm name approved if:

- The business is a sole proprietorship and is owned 100 percent by a Nevada registrant licensed pursuant to the provisions of NRS 623; AND
- The registrant is doing business under his/her real name (i.e., John Doe, Architect).

The board's decision to approve or deny a firm name is based upon its objective of protecting the public. Following is an example of criteria the board considers in granting approval of corporate or fictitious firm names:

- Possible confusion with an existing name
- Any connotation of an affiliation or endorsement not supported by fact (e.g., use of the word "international")
- A connotation of quality or services that is potentially misleading (e.g., "World's Best Architects")
- An effort to avoid a deserved reputation with negative connotations (e.g., using or changing a name to avoid public wrongdoings)
- Any other potentially false, deceptive or misleading aspect, such as: (1) A one-person firm cannot use the plural "John Doe, Architects," "John Doe Group," or "John Doe Partnership." (2) Firms wishing to use the plural terms "architects," "registered interior designers," or "residential designers" must have more than one such Nevada registrant employed with the firm. (3) Professional membership association appellations (e.g., AIA) can only be used in the firm's name if the named persons are registered in Nevada.

# **NOTICE:**

**All persons required to file with the Nevada Secretary of State must submit a *Certificate of Existence of Good Standing* and a *Nevada Business License* from the Nevada Secretary of State with the completed Firm Registration/Firm Name Approval Form.**

**Firm registration/firm name approval requests are not complete until such documentation has been received by the board office. Only complete requests will be submitted to the board for review.**

**Nevada Secretary of State: (775) 684-5708**

**\*The Nevada Secretary of State will request proof of registration with the Nevada State Board of Architecture, Interior Design & Residential Design. A copy of your wallet card is adequate proof.**



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**FIRM REGISTRATION/FIRM NAME APPROVAL FORM**

We hereby apply for approval of our firm name under the provisions of NAC 623.740.

**\*PLEASE TYPE\***

**\*Attach Additional Sheets if Necessary\***

Date of Application: \_\_\_\_\_

Proposed Name of Business: \_\_\_\_\_

If proposed name of business is an acronym, please explain what the acronym stands for:

\_\_\_\_\_

Street: \_\_\_\_\_

Firm Address City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Street: \_\_\_\_\_

Mailing Address City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Type of business (e.g. sole proprietorship, partnership, corporation, LLC): \_\_\_\_\_

Names of NV registrants, reg. numbers and percent ownership: \_\_\_\_\_

Date of registration with Nevada Secretary of State (if applicable): \_\_\_\_\_

*Note: You must attach a file stamped copy of the business's registration documents filed with the Secretary of State.*

Please list any other approved firm names that the NV registrant owners have requested and if the names are active or inactive. \_\_\_\_\_ Active Inactive  
\_\_\_\_\_ Active Inactive  
\_\_\_\_\_ Active Inactive

**Important:** Firm names that are inactive with both NV Secretary of State and NSBAIDRD may be requested for use.

**FOR BOARD USE ONLY**

Board meeting date \_\_\_\_\_

Approved / Denied (circle one)

Date letter sent \_\_\_\_\_

Date entered in database \_\_\_\_\_

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1. Briefly describe the nature of the business, including the services that will be offered to the public:

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2. Provide the composition of the firm, including the chain of command that will be followed with the organization, including the role of each individual and their responsibilities.

Name:		Role/ Responsibilities:	
Name:		Role/ Responsibilities:	
Name:		Role/ Responsibilities:	
Name:		Role/ Responsibilities:	
Name:		Role/ Responsibilities:	
Name:		Role/ Responsibilities:	
Name:		Role/ Responsibilities:	

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3. List the names of the officers, directors, partners, members or principles of the business, and the person(s) having "control" over the organization. "Control" is defined in NRS 623.349.4 as, "... 'control' means the direct or indirect possession of the power to direct or cause the direction of the management and policies of a business organization or association."

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4. List the names of the persons who own an interest in the business including their address, telephone number, Nevada registration number, position with the company, percentage of ownership interest, how the ownership interest is held (i.e. individually, shares, stock, etc.) and the services the person is to provide to the business. MAKE ADDITIONAL COPIES OF THIS FORM IF NECESSARY

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ NV registration no.: \_\_\_\_\_

Position: \_\_\_\_\_

Percentage ownership held: \_\_\_\_\_

How ownership is held: \_\_\_\_\_

Services provided to company: \_\_\_\_\_

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ NV registration no.: \_\_\_\_\_

Position: \_\_\_\_\_

Percentage ownership held: \_\_\_\_\_

How ownership is held: \_\_\_\_\_

Services provided to company: \_\_\_\_\_

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ NV registration no.: \_\_\_\_\_

Position: \_\_\_\_\_

Percentage ownership held: \_\_\_\_\_

How ownership is held: \_\_\_\_\_

Services provided to company: \_\_\_\_\_

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5. If an owner is not registered in Nevada, list the other states in which each owner is registered, as well as his/her NCARB or NCIDQ certificate number. For persons who are not registered in other states, nor NCARB or NCIDQ certificate holders, list the person's profession or occupation, any certificate or registration obtained by that person relative to his/her profession or occupation and the role that person will have in the organization.

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6. Has any person owning an interest in the business ever been arrested for any offense (misdemeanor or felony) for anything other than a traffic violation? If so, on a separate sheet of paper, explain in full detail, giving dates, offenses, places, names and the outcome and/or penalty.

- Yes
- No

Name(s): \_\_\_\_\_

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7. Does any other person hold a financial interest in the business who is able to exercise "control" over the business? If so, explain.

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**MAKE ADDITIONAL COPIES OF THIS FORM AS NECESSARY**

Each person owning an interest in the business must complete and sign the following affidavit:

State of: \_\_\_\_\_

County of: \_\_\_\_\_

\_\_\_\_\_ being first duly sworn, deposes and says: I am an owner of the business named in this application, have read the contents thereof, and to the best of my knowledge and belief, the foregoing statements regarding me and the business are true and correct in every respect, and do realize that a fraudulent statement in this application is probable cause to have this application denied, or to have the business registration revoked should it be issued on. I have read and understand Chapter 623 of the Nevada Revised Statutes.

Subscribed and sworn to before me this:

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Signature of Owner

My commission expires: \_\_\_\_\_

\_\_\_\_\_  
Signature of Notary Public

(Notary Seal)

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Signature of Notary Public

(Notary Seal)