



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

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

(702) 486-7300 - Phone  
(702) 486-7304 - Fax  
nsbaidrd@nsbaidrd.nv.gov - E-mail  
nsbaidrd.state.nv.us - Internet

Dear Registrant:

Enclosed please find a firm fact sheet and an application for registration of your business and firm name approval.

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.

If the board approves your application, you will be required to remit a \$300 application processing fee and a \$125 certificate of registration fee, for a total of \$425. 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

**NOTICE TO FIRM REGISTRATION**  
**APPROVAL APPLICANTS**

**All applicants required to file with the Nevada Secretary of State must include a *Certificate of Existence of Good Standing* from the Secretary of State with their application.**

**Applications will not be considered completed and forwarded to the board for approval until such documentation is received.**

For Secretary of State information, contact (775) 684-5708.



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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 the NSBAIDRD. Businesses applying for firm registration are automatically also applying for firm name approval and do not need to submit an additional application.

Businesses not owned by persons registered under NRS 623 are not required to register their firms with the 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.

Apply for **firm registration** 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.

Apply for **firm name approval** 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 apply for firm name approval or registration 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 application 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. *Example: Use of the word "international"*
- A connotation of quality or services that is potentially misleading. *Example: "World's Best Architects"*
- An effort to avoid a deserved reputation with negative connotations. *Example: Using or changing a name to avoid public wrongdoings*
- Any other potentially false, deceptive or misleading aspect. *Examples: (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 (i.e. AIA) can only be used in the firm's name if the named persons are registered in Nevada.*



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**APPLICATION FOR REGISTRATION OF A BUSINESS AND FIRM NAME APPROVAL**

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

**\*PLEASE TYPE APPLICATION\***

**\*APPLICATION DOWNLOADED FROM WEB SITE MAY BE COMPLETED ON COMPUTER\***

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

Attach additional sheets if needed. **Important:** Firm names that are inactive may be requested for use and approval by other Nev. firms.

**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:	<div style="border: 1px solid black; width: 240px; height: 35px;"></div>	Role/ Responsibilities:	<div style="border: 1px solid black; width: 420px; height: 35px;"></div>
Name:	<div style="border: 1px solid black; width: 240px; height: 35px;"></div>	Role/ Responsibilities:	<div style="border: 1px solid black; width: 420px; height: 35px;"></div>
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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: \_\_\_\_\_

---

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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Subscribed and sworn to before me this:

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

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

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

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

(Notary Seal)