STATE BOARD OF REGISTRATION
FOR PROFESSIONAL LAND SURVEYORS
DIVISION OF DESIGN PROFESSIONALS
DEPARTMENT OF BUSINESS REGULATION
1511 PONTIAC AVENUE, BUILDING 68-2, CRANSTON, RI 02920
TELEPHONE: (401) 462-9595 FAX: (401)462-9532
www:bdp.state.ri.us

2010-2012 APPLICATION
CERTIFICATE OF AUTHORIZATION (COA)
VALID JUNE 1, 2010 TO MAY 31, 2012

$100.00 Initial & Renewal Application Fee OR $ 25.00 Amendment Fee
Renewal Late Penalty Fee $10.00 per month postmarked after 5/31/10)

5-8-1.13 Board of registration for professional land surveyors - Permitted practices

(1) The practice or offer to practice land surveying as defined by this chapter by sole proprietorship, partnership, limited liability partnership, corporation or limited liability company, subsequently referred to as the "firm", through individuals is permitted; provided, that the individuals are in direct control of that practice; exercise personal supervision of all personnel who act in behalf of the firm in professional and technical matters; and are registered under the provisions of this chapter; and provided, that the firm has been inssued a certificate of authorization by the board of land surveyors.

(2) Within one year after the enactment of this chapter [July 12, 1990], every firm must obtain a certificate of authorization from the board and those individuals in direct control of the practice and who exercise direct supervision of all personnel who act in behalf of the firm in professional and technical matters must be registered with the board. The certificate of authorization shall be issued by the board upon satisfaction of the provisions of this chapter and the payment of an annual fee not to exceed fifty dollars ($50.00).

(3) It is the intent of the board of registration to establish that the professional land surveyor is responsible for land surveying services.

(4) Every firm desiring a certificate of authorization must file with the board an application for the certificate on a form provided by the board. A separate form provided by the board shall be filed with each renewal of the certificate of authorization and within thirty (30) days of the time any information previously filed with the board has changed, is no longer true or valid, or has been revised for any reason. If, in its judgment, the information contained on the application and renewal form is satisfactory and complete, the board shall issue a certificate of authorization for the firm to practice land surveying in this state.

(5) No firm that has been granted a certificate of authorization by the board of land surveyors is relieved of responsibility for the conduct or acts of its agents, employees, partners (if a partnership or a limited liability partnership), officers or directors (if a corporation), or members or managers (if a limited liability company) because of its compliance with the provisions of this section. No individual practicing land surveying under the provisions of this chapter is relieved of responsibility for land surveying services performed by reason of his or her employment or other relationship with a firm holding a certificate of authorization as subsequently described.

(6) A land surveyor may not, for the purposes of this section, be designated as being in responsible charge on more than two (2) certificates of authorization.

(7) Certificates of authorization shall be treated for all purposes hereunder, including, but not limited to, renewal, expiration and lapsing, as previously provided for certificates of registration in section 5-8.1-10; provided, however, that renewal may be effected at any time prior to or during the month of June of each even-numbered year (meaning biennially) commencing in year 2004.

(8) Limited liability partnerships, corporations and limited liability companies shall submit a copy of their articles of incorporation, articles of organization or certificate of registration in order to obtain a certificate of authorization from the board of land surveyors.

(9) Corporations other than those organized under chapter 5.1 of title 7, partnerships and sole proprietorships practicing in this state prior to July 12, 1990, shall fully comply with the provisions of this section within one year of that date.

(10) Effective one year from July 1, 1990, the secretary of state shall not issue a certificate of incorporation or certificate of organization or certificate of registration to any applicant, or a registration as a foreign corporation, limited liability partnership or limited liability company, to any firm, which includes among the objectives for which it is being established any of the words "surveyor", "surveying" or any modification or derivation of those words, unless the board of land surveyors has issued for the applicant a certificate of authorization or a letter indicating the eligibility of the applicant to receive the certificate. The firm applying shall supply the certificate or letter from the board with its application for incorporation or registration as a foreign corporation, limited liability partnership or limited liability company.

(c) Land surveyor previously registered. Each land surveyor holding a certificate of registration and each land surveyor-in-training under the laws of this state as previously in effect shall be deemed registered as a land surveyor or land surveyor-in-training as appropriate under this chapter.

(d) This section does not exempt the political subdivisions of the state, such as county, city, or town, or legally constituted boards, districts, or commissions, from obtaining a certificate of authorization from the board of registration when applicable.

EVERY PERSON RECEIVING THIS FORM MUST COMPLETELY FILL IT OUT AND RETURN IT TO THIS OFFICE. APPLICATIONS THAT ARE INCOMPLETE AND/OR ILLEGIBLE WILL BE RETURNED. If you are not requesting a certificate of authorization but are merely complying with the board's policy by completing this application, please fill in the top portion of this form, answer the 4 questions below, sign where signature is indicated, stamp your PLS stamp below and check here. _____.

Applicant Name _____

Address _____

Phone No._____ Fax No._____ EMail _____

*Corporation _____ Partnership_____ Sole Proprietorship_____ Municipality_____

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***ALL CORPORATIONS MUST SUBMIT AN ORIGINAL CURRENT CERTIFICATE OF GOOD STANDING FROM THE RHODE ISLAND SECRETARY OF STATE'S OFFICE (401-222-3040) TO THIS BOARD.**

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Services Offered _____

Or Reason for Exemption_____

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1. Have you or any partner, officer, majority shareholder or member of the Board of Directors, been convicted of or entered into a plea bargain any offense which involves, fraud, professional negligence, moral turpitude or are any such charges now pending?
If yes, for each such offense, state the nature of the charge, the State in which the charge was brought and the person or persons convicted or has entered into a plea. If any charges are pending, please explain on a separate sheet. **Yes** _____ **No** _____
2. Has any officer, majority shareholder or member of the Board of Directors, or any registered PLS employed by the firm, had his/her license to practice land surveying revoked or suspended in any State? If yes, state the name of such person, their address, and the nature and State of such revocation or suspension on a separate sheet. **Yes** _____ **No** _____

I am aware that the Certificate of Authorization may be revoked if any agent, employee, director or officer of the corporation violates or causes to be violated any provisions of those laws or regulations governing the practice of land surveying in RI.

3. Have you read/understood the provisions of R.I. Gen. Laws Chapter 5-8.1, as amended? **Yes** _____ **No** _____
4. Have you read/understood the Rules of the Board adopted by the Board. **Yes** _____ **No** _____

I am aware that the Certificate of Authorization may be revoked if any agent, employee, director or officer of the corporation violates or causes to be violated any provisions of those laws or regulations governing the practice of land surveying in RI.

Signed: _____ **Title:**_____ **Date:**_____

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List all stockholders if corporation, partners if partnership or sole proprietorship:

_____

_____

_____ _____

Name of Principal/Proprietor & Title Signature

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Name(s) of person(s) in Responsible Charge and Surveyor's Stamp(s) (Below**).** Each person(s) listed as in responsible charge must fill out, sign and have the accompanying affidavit notarized**.** If more than one person is named, the stamp of each surveyor will be required. Attach additional sheet(s) if necessary. **Is this person(s) an employee of the firm?** Yes_____ No**_____

Name: _____ RIPLS #_____

Name: _____ RIPLS #_____

Name: _____ RIPLS # _____

LAND SURVEYOR STAMP(S) FOR PERSON(S) IN RESPONSIBLE CHARGE - STAMP BELOW

Please enclose your check for One Hundred Dollars **(**$100.00**)** payable to the General Treasurer, State of RI. This form must be returned postmarked by **May 31, 2010**, to avoid penalties (**a Ten Dollar ($10.00) per month fine will be assessed for late submittals, postmarked after May 31, 2010)** or disruption of your business services. For purposes of compliance, no person may be in responsible charge of more than 2 firms. **** If the person listed in responsible charge is not an employee of the firm, please explain the relationship between the applicant and the individual listed in responsible charge.

Late Fees do not apply to new applicants.

State Board of Registration for Professional Land Surveyors

AFFIDAVIT FOR PERSON LISTED IN RESPONSIBLE CHARGE ON APPLICATION FOR CERTIFICATE OF AUTHORIZATION (COA)

1. I, _____, hereby certify under oath that I am a registered professional land surveyor, registered in the State of Rhode Island. My registration number is _____. My current address is _____

2. I hereby certify under oath that I have agreed to and have authorized (Firm or Individual) _____
(Address) _____
to submit my name as the registered professional land surveyor in responsible charge for that firm on their Certificate of Authorization.

3. I hereby certify and agree under oath that I am in responsible charge of any and all land surveying work to be performed by the above named firm or individual and that I acknowledge the assumption of the responsibilities and obligations associated with that position as set forth in Rhode Island General Laws, Title 5, Chapter 8.1.

4. I hereby certify under oath that I acknowledge that I have the obligation of keeping this Board informed at all times in the event that I should terminate my employment and/or position of land surveyor in responsible charge. I further acknowledge that in the event that such a termination of responsibility shall occur, that I must notify this board, in writing, within seven (7) days of the date of such termination and that otherwise, the Rhode Island Board of Registration for Professional Land Surveyors shall be authorized to hold me responsible for any and all work performed by this firm.

5. I hereby certify under oath that at all times during which I shall be in responsible charge of the land surveying work of the above named firm that I shall exercise direct supervisory control of said work and insure that said land surveying work is done in full compliance with the law. I further certify that I shall direct said firm to comply with the law as set forth and in the event that there is any violation of law or improper practice, that I shall immediately notify said firm and this Board, in writing.

6. I hereby certify that I have read and reviewed the provisions of Title 5, Chapter 8.1 in regards to the obligations of a professional land surveyor and that I have further read the Code of Ethics and the Rules and Regulations of the Rhode Island Board of Registration for Professional Land Surveyors prior to the affixing of my signature to this affidavit.

Whereupon I have caused my signature to be affixed to this application under oath.

_____ _____
Signature Date of Signature

State of
County of

Before me on this _____ day of _____ , 20____, did appear, a person known to me and to me known and he did acknowledge the signing of this document to be his free act indeed.

_____
Notary Public

My Commission expires: _____

Tax Payer Status Affidavit / Identity Verification

All persons applying or renewing any license, registration, permit or other authority (hereinafter called "licensee") to conduct a business or occupation in the state of Rhode Island are required to file all applicable tax returns and pay all taxes owed to the state prior to receiving a license as mandated by state law (RIGL 5-76) except as noted below.

In order to verify that the state is not owed taxes, licensees are required to provide their Social Security Number and Federal Tax Identification Number as appropriate. These numbers will be transmitted to the Division of Taxation to verify tax status prior to the issuance of a license. This declaration must be made prior to the issuance of a license.

Please return this affidavit along with your license application to: Rhode Island Department of Business Regulation, 1511 Pontiac Avenue, Cranston, RI 02920.

Licensee Declaration

- ❑ I hereby declare, under penalty of perjury, that I have filed all required state tax returns and have paid all taxes owed.
- ❑ I have entered a written installment agreement to pay delinquent taxes that is satisfactory to the Tax Administrator.
- ❑ I am currently pursuing administrative review of taxes owed to the state.
- ❑ I am in federal bankruptcy. (Case #_____)
- ❑ I am in state receivership. (Case #_____)
- ❑ I have been discharged from Bankruptcy. (Case #_____)

_____
Type of Professional License for which you are applying

_____ _____
Full Name (Please Print or Type) Social Security Number (or FEIN if appropriate)

_____ _____
Signature Phone Number (including area code if not 401)

Date_____