CANNON BUILDING
861 SILVER LAKE BLVD., SUITE 203
DOVER, DELAWARE 19904-2467

STATE OF DELAWARE

BOARD OF ARCHITECTS

TELEPHONE: (302) 744-4500
FAX: (302) 739-2711
WEBSITE: DPR.DELAWARE.GOV
EMAIL: customerservice.dpr@delaware.gov

VERIFICATION OF ARCHITECT IN CHARGE INFORMATION

INSTRUCTIONS

Use this form to report a change in affiliation of the ***Delaware-licensed*** Architect who has been designated as the professional in charge with direct supervision of the practice of architecture on behalf of a business that holds a Delaware Certificate of Authorization.

Complete the information requested below to add or remove an architect in charge. Complete only one change form per request type. You must upload each completed and signed form on the attachments page of the *Manage Affiliations* Service Request in **DELPROS**. ***A person with knowledge of the business must complete, sign, and date the form.***

BUSINESS INFORMATION – *Required to be completed*

1. Business Name (*as it appears on Delaware license*): _____

2. Delaware Certificate of Authorization License Number: **S7 -** _____

ARCHITECT INFORMATION – *Required to be completed*

Select Type of Request (check only one):

☐ Add Architect In Charge Affiliation ☐ Remove Architect In Charge Affiliation

1. Name of Architect In Charge: _____ _____
First Name Last Name

2. Delaware Architect License Number: **S5** - _____

BUSINESS REPRESENTATIVE INFORMATION – *Required to be completed*

1. Printed Name of Person Completing Form on Behalf of Business: _____

2. Title/Position: _____

3. Do you understand that any change in the designated professional(s) in charge must be reported to the Board within 30 days of the change? Yes ☐ No ☐

Signature: _____ Date: _____

UPLOAD THIS DOCUMENT TO THE SERVICE REQUEST IN DELPROS