

**ARCHITECTS ACT
(SECTION 20)**

APPLICATION FOR APPROVAL OF FIRM'S NAME

A CURRENT INFORMATION

Name of Architect _____

Registration No. _____

Place of employment
(Existing firm) _____

Address of place of
employment
(Existing Firm) _____

Contact Number(s) _____ (O) _____ (HP)

Existing **architectural** firm(s) in your name (Please list and provide details, eg. name of firm, type of firm, date of registration) (if applicable)

Name of Partner(s)/ Director(s) and Registration No(s) (if applicable)

Please declare any existing **non – architectural firms** with similar firm name(s) to the proposed firm name that are in your name (Please list and provide details) (If applicable)

B DETAILS OF APPLICATION

Type of Application Change of firm name () New firm name ()

Type of firm Sole Proprietorship () Partnership ()
 Licensed Partnership () Limited Liability ()
 Licensed Corporation () Partnership (LLP)

Name applied for _____

Reason for name _____

Principal place of business _____

Contact Number(s) _____ Email _____

Reason for change of firm name (if applicable) _____

Proposed date for deregistration of existing firm (if applicable) _____

C DECLARATION

I/We*, the undersigned, hereby declare that all the foregoing statements are true in every respect.

Name and Signature of Applicant(s) _____

Date of application _____

* Delete where applicable
() Tick where applicable