



Ohio Board of Landscape Architect Examiners

77 South High Street, 16th Floor
Columbus, Ohio
43215-6108

Phone (614) 466-2316
Fax (614) 644-9048
www.arc.ohio.gov/lae

Instructions for Reinstatement of Registration to Practice Landscape Architecture

- Submit the notarized Reinstatement Application (LAE 012)
- Incomplete applications will be returned. Keep a copy for your files
- If applicable, include verification of registration in state of residence or practice.
- If applicable, include copies of CLARB Annual reports.
- **Include proof of completion of 24 hours of continuing education activities** within the past two years. Acceptable proof includes Certificates of Completion, an ASLA transcript, etc. For more information on the Continuing Education requirements, see <http://arc.ohio.gov/lae/ce.stm>
- **This license can be renewed only if the Continuing Education requirement has been fulfilled.**
- Include a statement describing your professional activities since the Ohio registration expired.
- Determine correct reinstatement fee, and include a check or money order, US dollars only, payable to "Treasurer, State of Ohio".
 - Licenses with 2009 expiration: \$312.50
 - Licenses with 2007 expiration: \$468.75
 - Licenses with 2005 expiration: \$500.00
 - Maximum reinstatement fee is \$500.00
- **Mail to:** Ohio Board of Landscape Architect Examiners, 77 S. High St., 16th Fl, Columbus, Ohio 43215-6108.

For questions or assistance, contact:
Jodi Ross, Executive Secretary
Phone: (614) 466-2316
Fax: (614) 644-9048
Email: jodi.ross@arla.state.oh.us

FIRM REGISTRATION REQUIRED

Ohio Revised Code § 4703.331 requires all firms, partnerships, associations, limited liability companies and corporations to obtain a firm Certificate of Authorization **prior** to providing landscape architecture services in Ohio. See "Firm Registration" at <http://arc.ohio.gov/lae/firmreg.stm> for further information. In addition, all firms must register to do business in the state of Ohio with the Ohio Secretary of State at <http://www.sos.state.oh.us/SOS/businessServices.aspx>



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Application for Reinstatement of Registration to Practice Landscape Architecture (LAE 012)

PERSONAL

Name		Email (required)	
Social Security No. (required)		Birth Date (month/day/year)	
Ohio License #		Year Ohio License Expired	
Send all correspondence to: <input type="checkbox"/> Home <input type="checkbox"/> Firm			
Residence address		Firm Name	
City	County (if Ohio)	Street Address	County (if Ohio)
City, State, Zip + 4		City, State, Zip + 4	
Phone	Fax	Phone	Fax

COMPLETE THE FOLLOWING:

1. **CLARB CERTIFICATION:** If applicable, include copies of all CLARB Annual Reports for the years Ohio license was inactive.
 CLARB Cert. # _____ CLARB File # _____ Issue Date _____
2. **OUT OF STATE:** If applicable, attach verification of registration in state of residence or practice.
3. **CONTINUING EDUCATION:** Proof of completion of 24 hours of Continuing Education. Acceptable proof includes ASLA transcripts or Certificates of Completion. Visit <http://arc.ohio.gov/lae/ce.stm> for complete details.
4. **PROFESSIONAL ACTIVITIES:** Include a statement your professional activities since the license expired.
5. **ANSWER THESE QUESTIONS:** If you answer yes to any of questions A—G, submit a statement of facts for each question on a separate sheet of paper.
 - A. Yes No Has your professional registration been denied, suspended or revoked in any jurisdiction?
 - B. Yes No Have you surrendered or allowed a professional license to lapse in any jurisdiction due to pending or threatened disciplinary action?
 - C. Yes No Have you been found by any court to have violated the professional registration laws of any jurisdiction?
 - D. Yes No Have you or your firm been the subject of disciplinary action by a professional registration board? Disciplinary action includes, but is not limited to, any reprimand, fine, probation, suspension, revocation, cease and decision order, or other action relating to the practice or registration of architects, engineers, or landscape architects, including consent orders, settlement agreements, stipulations or the like.

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Board Use Only	Date Received	Check #
Disciplinary Database	Director Approved	Board Approved



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- E. Yes No Have you been convicted of any crime (other than a minor misdemeanor)?
- F. Yes No Are you registered with the Ohio Civil Child Sexual Abuse Registry under ORC 4799.01?
- G. Yes No Are you aware of the requirements for firm registration set forth in ORC 4703.331 and OAC 4703:1-3-03?

A F F I D A V I T

By signing this document, the licensee affirms all questions have been truthfully answered, and no information has been withheld that might affect the application. Failure to respond truthfully can result in board sanctions, including denial of the renewal application, fines, suspension, revocation and/or other penalties.

Signature _____

Subscribed and sworn before me on this _____ day of _____, 20_____

in the County of _____, State of _____.

Signature of Notary Public

Notary Seal

My commission expires _____