



South Carolina Department of Labor, Licensing and Regulation
South Carolina Board of Architectural Examiners

110 Centerview Drive (29210)
P.O. Box 11419 • Columbia, SC 29211
Phone: 803-896-4408 • Fax: 803-896-4427 • www.llr.sc.gov/POL/Architects/



Emeritus Architect Application

PERSONAL INFORMATION

Full Name: _____

Registration No.: _____ Email: _____

Telephone No.: _____ Fax: _____

Mailing Address: _____

INSTRUCTIONS

1. Complete the Certification Statement by signing and dating below.
2. Mail this form to:

SC Board of Architectural Examiners
PO Box 11419
Columbia, SC 29211-1419

OR Email to:
Contact.Arch@llr.sc.gov

CERTIFICATION STATEMENT

EMERITUS ARCHITECT: I certify I am 65 years old or older, have been licensed as an architect for ten (10) consecutive years and am retired from active practice as an architect. As an Emeritus Architect, I understand that I may not provide **ANY** architectural services at all.

Original Signature

Date