Professional Licensing Agency

402 West Washington Street Room W072 Indianapolis, IN 46204



Governor of Indiana
Lindsay M. Hyer
PLA Executive Director

Architect and Landscape Architect Reinstatement Form

Your license has been expired for over three years. To reinstate your license by mail, send this form with the renewal fee of \$340 to the address above, with the required documentation listed below* allowing 4 weeks for processing. Make check or money order payable to 'Indiana Professional Licensing Agency'. If you answer 'Yes' to any question 1-3 below, send a detailed statement regarding the response with your renewal form.

LICENSEE INFORMATION: Update address, if needed, and provide a current phone number and email address								
Licensee Name	License Nun	nber	Expiration Date	Reins	tatement	Fee		
					\$340			
Street Address								
City	State		Zip Code					
Phone Number	Email Address	Email Address						
QUESTIONS								
1. Since you last renewed, has any professional license, certificate, registration, or permit you hold or have held been disciplined or are formal charges pending in any state or U.S. territory?					YES	NO		
2. Since you last renewed, have you been denied a license, certificate, registration, or permit in any state or U.S. territory?					YES	NO		
3. Since you last renewed, and except for minor violations of traffic laws resulting in fines and arrests or convictions that have been expunged by a court, have you been arrested, entered into a diversion agreement, been convicted of, pled guilty to, or pled nolo contendere to any offense, misdemeanor, or felony in any state or U.S. territory?						NO		
CONTINUING EDUCATION (CE is not required if your license was issued after 10/1/2021)								
4. Have you completed the required continuing education to reinstate your license?				YES	NO			
5. Do you want to reinstate to active or inactive status?			ACTIVE	INACTI	/E			
LICENSEE AFFIRMATION								
I hereby swear or affirm under the penalties of perjury that I understand the State Board of Registration for Architects & Landscape Architects statutes and rules, and have answered the questions true to the best of my knowledge.								
Signature of Licensee		Date (month	ı, day, year)					

Required Documentation:

- 1. Letter of work history or resume to include the following information since the expiration of your Indiana license: place(s) of employment, a list of projects worked on, confirm if you have or have not placed your stamp/seal on any documents within the State of Indiana, and confirm if you have or have not performed work as described in IC 25-4-1-17 or IC 25-4-2-1 in the state of Indiana.
- 2. Verification of an active architect/landscape architect license in another state.
- 3. Proof of Continuing Education for the past two years from the date of your reinstatement application.

Retired Status: If any registered architect desires to retire from the practice of architecture in Indiana, the architect may submit to the board the architect's verified statement of intention to withdraw from practice. If you wish to request 'retired' status, please email your statement to pla10@pla.in.gov and do not complete the renewal process. For more information regarding 'retired' status, please visit on the web at www.pla.in.gov.

FOR OFFICE USE ONLY				
Renewal Fee	Receipt No.	Date		