



### For Mailing Addresses

***Instructions:** Please submit this completed form and required fee to the Alabama Board for Registration of Architects office at RSA Union; Suite 390; 100 North Union Street; Montgomery, Alabama 36130-4450.*

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Requestors Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Phone: \_\_\_\_\_

Purpose of Request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please indicate from the list below the type of data and preferred form you are requesting (choose one):

- ☐ Mailing Labels for Licensed Architects
- ☐ Mailing List on Electronic Media for Licensed Architects
- ☐ I have enclosed the required \$25 fee in the form of a check, cashier's check, corporate or business check, money order, or personal check [Admin. Code 100-X-1-.14] made payable to the Alabama Board for Registration of Architects.

I solemnly swear or affirm that the statements made herein are accurate, complete, and true to the best of my knowledge and belief. I understand and agree that by typing my name, I am providing an electronic signature that has the same legal effect as a written signature pursuant to Ala. Code §§ 8-1A-2 and 8-1A-7.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_