

# VERIFICATION OF EXPERIENCE IN RESPONSIBLE CHARGE - ARCHITECT

State of Hawaii, Board of Engineers, Architects, Surveyors & Landscape Architects

Access this form via website at: [cca.hawaii.gov/pvl](http://cca.hawaii.gov/pvl)

The applicant named below has applied for licensure by **endorsement** with the Board of Professional Engineers, Architects, Surveyors and Landscape Architects. The Board's rules allow an applicant to qualify for licensure on the basis of experience in responsible charge. To verify this period of experience, this form shall be completed by a licensed architect with personal knowledge of the applicant's experience in responsible charge, and mailed to: **Board of Professional Engineers, Architects, Surveyors and Landscape Architects, P.O. Box 3469, Honolulu, Hawaii 96801**. This form must be completed by a person other than the applicant.

NAME OF APPLICANT:	NAME OF LICENSED ARCHITECT VERIFIER:
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FROM	TO	DESCRIPTION OF ARCHITECTURAL WORK

I hereby certify that I have knowledge of the applicant's architectural experience as stated above in which the applicant was in responsible charge of the architectural work.

_____ Signature of Licensed Architect Verifier	_____ Date
Print Name: _____	Phone No.: _____
Address: _____ _____	License No.: _____
	State of Licensure: _____

This material can be made available for individuals with special needs. Please call the Licensing Branch Manager at (808) 586-3000 to submit your request.