

BCSLA PROFESSIONAL STAMP REPLACEMENT - ORDER FORM

To order a professional stamp replacement, return completed form with payment to the BCSLA office by mail to #450, 355 Burrard Street, Vancouver, BC V6C 2G8 or by email to admin@bcsla.org. A copy of the BCSLA Administrative Fee Schedule is available at www.bcsla.org/profession/policies-and-procedures.

In accordance with BCSLA bylaws the following applies:

- 2.7** *The Registered Landscape Architect will use an original impression of the stamp or seal, together with the Registered Landscape Architect's signature and date, on all original drawings and specifications from his or her practice for use in the Province as documents of record, appeal permit or construction, or to evidence professional review or opinion, and as otherwise required or deemed prudent by the Registered Landscape Architect; no Registered Landscape Architect shall affix his or her stamp or seal, or sign, any drawings or specifications that:*
- (a) *the Registered Landscape Architect has not prepared; or*
 - (b) *the Registered Landscape Architect's staff, contractors or consultants have not prepared under the Registered Landscape Architect's supervision.*
- 2.8** *All stamps issued by the Registrar remain property of the Society; and must be returned to the Registrar by registered mail when a Registered Landscape Architect ceases to be a Member of the Society.*

A complete copy of the Bylaws is available at www.bcsla.org.

NAME:

Indicate how you would like your name to appear on your stamp. (TYPE or PRINT CLEARLY in uppercase letters)

ENCLOSED PAYMENT:

- Cheque for \$131.25** (\$125.00 + \$6.25 GST) enclosed (payable to "BCSLA").
- Please charge my **Visa Credit Card** in the amount **\$131.25** (\$125.00 + \$6.25 GST).
(Sorry, no other credit cards are accepted.)

Visa Cardholder Name

Visa Cardholder Signature

Visa Credit Card #

Expiry Date (MM/YY)

3-Digit CVV Code

BN131999757 RT0001

PLEASE DECLARE ONE OF THE FOLLOWING:

- I will immediately return my original professional stamp in person or by registered mail to the BCSLA office upon receipt of my replacement stamp.
- I have misplaced my professional stamp. Should I recover my original stamp, I will immediately return it to the BCSLA office in person or by registered mail.

Name (please print)

Authorized Signature

Date (MM/DD/YYYY)