



ACCOUNTANCY BOARD OF OHIO

77 SOUTH HIGH STREET, 18TH FLOOR

COLUMBUS, OHIO 43215-6128

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John R. Kasich, Governor

John E. Patterson, Executive Director

2017 FIRM REGISTRATION RENEWAL APPLICATION-FIRMS NOT PERFORMING ATTEST SERVICES

All public accounting firms in Ohio that do not perform any financial reporting services (i.e., firms engaged in tax practice, consulting, etc.) and that use the "CPA" or "PA" designation with the firm name must register with the Board and use this renewal application. If you perform or offer to perform attest services, such as compilations, reviews, audits, and attestation engagements, you must register with the Board as an attest firm and use the renewal application for attest firms. Please read the applicable law (Ohio Revised Code sections 4701.01 and 4701.04) and rules (Ohio Administrative Code rules 4701-13-01 through 4701-13-11 and 4701-7-04). The accountancy law and Board rules are available on our Web site.

The renewal deadline is August 31, 2017. The Board will not abate late fees.

Renewal checklist: (Put N/A ("Not applicable") in front of any item that does not apply to your firm.)

- Renewal fee: \$30.00. Make check payable to: Treasurer, State of Ohio.
List of names, addresses, and CPA/PA numbers (CPA.xxxxx or PA.xxxxx) of all licensed employees.
List of all owners of the firm, with the CPA/PA numbers (CPA.xxxxx or PA.xxxxx) of all licensed owners.
Copy of the firm's letterhead including the mailing address, telephone number, and contact person for each Ohio office.
Signed statement, if the firm is a limited liability entity, that the firm possesses adequate professional liability insurance per rule 4701-13-01. (This can be on the firm's letterhead.)
If the firm is requesting an exemption from peer review requirements per division (J) of section 4701.04 of the Revised Code, please check this line and submit a professional services form with this application.
A signed statement that the firm is in compliance with divisions (C) and (D) of section 4701.04 of the Ohio Revised Code. (This can be on the firm's letterhead.)

Name of Firm: _____

Firm ID Number

EIN Number

Name of Chief Executive Officer: _____

Licensee ID number

Name of Contact Person if different from above: _____

E-mail Address

Telephone

Address: _____
Mailing Address

Street Address (Physical Address)

Address: _____
City State Mailing Zip

City State Street Zip

I hereby certify that to the best of my knowledge and belief, all information contained in this application, as well as the accompanying attachments, is true, accurate, and complete.

PRINTED NAME and TITLE

SIGNATURE

DATE