

**TEXAS STATE BOARD OF PUBLIC ACCOUNTANCY**

William Treacy, Executive Director  
 (512) 305-7800  
 FAX (512) 305-7875

333 Guadalupe, Tower 3, Suite 900  
 Austin, TX 78701-3900  
 www.tsbpa.texas.gov

## REGISTRATION OF A SOLE PROPRIETORSHIP

REFER TO THE INSTRUCTIONS FOR REGISTRATION OF A SOLE PROPRIETORSHIP

**Sole Proprietor Information (Type or Print)**

Federal Identification No. \_\_\_\_\_

1. Firm Name

\_\_\_\_\_

2. Principal Office Address

\_\_\_\_\_  
 Street City State Zip Code

3. Mailing Address if Different

\_\_\_\_\_  
 Street City State Zip Code

4. Principal Office Telephone Number \_\_\_\_\_

Email \_\_\_\_\_

5. Contact person for firm registration and license renewals (must be the owner and a CPA)

\_\_\_\_\_  
 Name Certificate Number State

6. Date sole proprietorship was formed

\_\_\_\_\_

Date sole proprietorship commenced practicing in Texas

\_\_\_\_\_

7. If this is a Texas firm whose name has changed, list previous firm name:

\_\_\_\_\_  
 Previous Firm Name

\_\_\_\_\_  
 Firm Registration Number

\_\_\_\_\_  
 Date Dissolved

\_\_\_\_\_  
 Effective Date of Name Change

8. Has this firm ever had an application for a license to practice public accountancy denied or had such a permit revoked or suspended by any state or federal agency?

YES  NO If YES, attach an explanation.

The *Public Accountancy Act* requires that the Board be notified within one month if:

- the sole proprietorship ceases to exist - date of dissolution must be provided to the Board
- there are any changes in the address of the sole proprietorship

\_\_\_\_\_  
 Signature

For Board Use Only		
FIRM OFFICE FORM ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO	REGISTRATION NO.	
PEER REVIEW FORM ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO	APPROVED	DATE