

North Carolina State Board of Certified Public Accountant Examiners

1101 Oberlin Road Suite 104 • PO Box 12827 • Raleigh NC 27605
Phone 919-733-1422 • Fax 919-733-4209 • Web www.nccpaboard.gov

REQUEST FOR INACTIVE STATUS

(No annual renewal fee, CPE, or return of CPA certificate required)

Name: _____

NC CPA Certificate Number: _____

Business Name: _____

Mailing Address: _____

City/State/ZIP: _____

Is this a change of address? Yes No

Daytime Phone Number: _____

Email Address: _____

I desire to be classified as inactive. I have read the rules of the Board found in 21 NCAC 08A .0301(b)(20), 08A .0308, 08J .0105, and 08J .0106 and understand that under North Carolina Accountancy Statutes and Rules, **I cannot use the title Certified Public Accountant (CPA) or allow anyone to refer to me as a Certified Public Accountant (CPA) in North Carolina or as an inactive CPA.** I will not assume or use, in writing or orally, directly or indirectly or through third parties, "any words, letters, abbreviations, symbols or other means of identification" to identify myself as being licensed as a CPA or as an inactive CPA. Such representation includes, but is not limited to, "...the use of titles or legends on letterheads, reports, business cards, brochures, resumes, office signs, telephone directories or any other advertisements, news articles, publications, listings, tax return signatures, signatures on experience or character affidavits for exam or certificate applicants, displayed membership in CPA associations, displayed CPA licenses from this or any other state, and displayed certificates or licenses from other organizations which have the designation 'CPA' or 'Certified Public Accountant' by the [my] name."

An individual who is licensed as a CPA in another jurisdiction and who does not reside in North Carolina and does not have an office in North Carolina may request inactive status of his or her North Carolina CPA certificate and exercise his or her practice privilege in North Carolina pursuant to NCGS 93-10.

I affirm that I will not identify myself as a CPA to any person in any manner as specified in 21 NCAC 08A .0308(a) and (b) as long as I am on inactive status and that the information shown above is true and accurate.

Signature: _____

Date: _____

NOTE: Inactive status is effective upon your receipt of the letter from the Board confirming your request for your NC CPA license to be classified as inactive.