# DSA 600-R

CASp Certification Renewal Application (11/20/20 ~~07/01/15~~)

Options to Apply

~~INSTRUCTIONS:~~ Please read section VI. Certification Renewal of the *CASp Examination, Certification, and Practice Standards Handbook* (11/20/20 ~~02/2016~~), incorporated by reference, carefully before filling out the application. Online renewal and payment by credit card through your CASp Account ensures faster processing of certification renewals. ~~Items with an asterisk (\*) are required, please update as necessary.~~ All items are required unless otherwise noted, please update as necessary.

Please note that a $150 Delinquency Fee will be charged if you fail to complete the certification renewal process prior to certification expiration. The delinquency fee is assessed when you submit your certification renewal application after the expiration date of your certification, or complete the certification process after the expiration date of your certification, and is due in additional to and along with certification renewal fees.

Mail-in applications for certification renewal are required to be accompanied by a check or money order for the Application Evaluation Fee ($100) and Certification Fee ($200), made payable to "CASp Program." Include your name and CASp number on the subject line of the payment. If applicable, you are required to also submit a record of the disability access inspections certificates (DAIC) issued to you during the certification period. Mail the printed copy of your renewal application along with your payment and the DAIC record, if applicable, to the address below.

A candidate must complete the certification renewal process, which includes submission of all required information and payment of fees, prior to certification expiration. A candidate that does not complete the certification renewal process prior to certification expiration will be assessed a Delinquency Fee of $150.

MAILING ADDRESS

Division of the State Architect  
CASp Program  
1102 Q Street, Suite 5100  
Sacramento, CA 95811

DEPARTMENT OF GENERAL SERVICES PRIVACY NOTICE ON INFORMATION COLLECTION

Collection and Use of Personal Information.

The Department of General Services (DGS), Division of the State Architect (DSA) collects the information requested on this form as authorized by Government Code Sections 4459.5 and 4459.8. DSA uses this information to establish eligibility for certification renewal under the Certified Access Specialist (CASp) program. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. DGS's general privacy policy is available at [www.dgs.ca.gov/Privacy](https://www.dgs.ca.gov/Privacy)

Providing Personal Information. All the personal information requested in the form is mandatory unless otherwise noted. Failure to provide all the necessary information will result in delay or denial of approval of the renewal application for the CASp program. Please do not provide personal information that is not requested.

Access to Your Information. You may review the records maintained by DSA that contain your personal information, as permitted by the Information Practices Act. See below for contact information.

Possible Disclosure of Personal Information. The information you provide may also be disclosed when required by law.

Contact Information. For questions about this notice or access to your records, you may contact Records Coordinator at DSA at (916) 445-8100 or by mail at:

Department of General Services, Division of the State Architect

Records Coordinator

1102 Q Street, Suite 5100, Sacramento, CA 95811

Contact Information  
Your Application Number is  
~~Title Mr. Mrs. Ms. Dr. \*~~  
First Name~~\*~~  
~~Middle Name~~  
Last Name~~\*~~  
Nature of Employment~~\*~~

CA Licensed Architect  
CA Licensed Landscape Architect  
CA Licensed Civil Engineer  
CA Licensed Structural Engineer  
Accessibility Consultant  
ADA Coordinator  
Attorney  
Building Official  
Designer/Space Planner  
Facility Management  
Field Inspector  
Plans Examiner  
General Contractor  
Government Agency  
Other (please specify)

Mailing Address - Street Address or PO Box~~\*~~  
City~~\*~~  
State~~\*~~   
Zip Code~~\*~~   
Primary Phone Number~~\*~~ (Please use ###-###-#### format)  
~~Phone Number Ext.~~   
Alternate Phone Number (Optional) (Please use ###-###-#### format)  
~~Alternate Phone Ext.~~   
Email Address~~\*~~   
Business/Organization Name (Optional)   
Update my profile with new contact information

~~License/Certification (if applicable)~~

~~General Contractor Class A  
General Contractor Class B  
DSA Project Inspector I  
DSA Project Inspector II  
DSA Project Inspector III~~

~~License/Certification #  
State:   
Expires (mm/dd/yyyy):~~

Professional, License, ~~or~~ Registration, or Certification (required, if applicable)  
CASps who hold a professional license and/or registration must update the information for the California license and registrations held.  
Type

LICENSE:  
ArchitectLandscape ArchitectCivil EngineerStructural EngineerCERTIFICATION:General Contractor Class AGeneral Contractor Class BDSA Project Inspector IDSA Project Inspector IIDSA Project Inspector III

~~Registration/License~~ Number  
State Issued  
Expiration Date

INFORMATION AFFECTING GOOD STANDING ~~BACKGROUND INFORMATION~~   
In addition to information regarding qualifications as described under the eligibility categories, a candidate is required to disclose background information regarding professional license suspension, revocation, and denial of license renewal, if applicable; and if the candidate has ever been convicted of, pled guilty to, or pled nolo contendere (no contest) to a misdemeanor or felony. The CASp Program Regulations require disclosure of such crimes which include, but are not limited to:  
1. A conviction of child abuse.  
2. A conviction as a sex offender.  
3. The conviction of any crime involving narcotics, dangerous drugs, or dangerous devices, as defined in Section 4022 of the Business and Professions Code.  
4. A conviction for assault and/or battery or lewd conduct.

A candidate is required to include a conviction that has been dismissed or expunged pursuant to Sections 1203.4, 1203.4a, or 1203.41 of the Penal Code, including infractions, misdemeanors, and felonies. A candidate must provide dismissal of such convictions to the State Architect via a certified copy of the court order. The candidate must also include any conviction that arose from military service, any in which the imposition of execution of sentence was suspended, any which arose as a result of a failure to appear, an order of rehabilitation was entered, any record of conviction which was expunged, or a pardon was granted. Minor traffic violations and convictions that were adjudicated in the juvenile court which are two years or older do not need to be reported. "Minor traffic violations" are defined as traffic infractions under $1000 not involving alcohol, dangerous drugs, or controlled substances.

PLEASE ANSWER THE FOLLOWING QUESTIONS:

1. ~~Since your most recent certification was granted,~~ Have you had a license, or registration suspended, revoked or denied in any state? Yes No  
If yes, please explain ~~provide information~~  
  
2. ~~Since your most recent certification was granted,~~ Have you been convicted of, pled guilty to, or pled nolo contendere (no contest) to any misdemeanor or felony?  
If yes, please explain ~~provide information~~  
  
Continuing Education Units (CEU)

Fifteen CEU are required for certification renewal. If you need more space, attach additional sheets. ~~A minimum of five CEU must address regulatory updates to the accessibility provisions of the California Building Code.~~   
  
California Building Code – Minimum of five CEU required. ~~Continuing Education~~   
~~List all continuing education within the current certification period related to regulatory updates to the California Building Code.~~   
  
Provider  
Title  
Hours/Units  
Date  
Completed  
  
Federal Laws, Standards, and Regulations ~~Continuing Education (CE) and~~ or Equivalent Activity  
~~List all courses that increases knowledge and understanding of federal accessibility regulations, standards, or guidelines and/or equivalent activity for which you have earned CEU within the current certification period.~~   
  
Provider  
(if applicable)   
Title ~~Equivalent Activity/Course Description~~  
Hours/Units Date  
Completed  
  
Record of Disability Access Inspection Certificates

If applicable, attach ~~Provide~~ a record of all disability access inspection certificates (DAIC) that have been issued to you within the current certification period:

ISSUED DAIC - For each DAIC that has been issued, indicate the certificate number issued, date of inspection and the city and zip code ~~name and address~~ of the facility inspected.  
UNISSUED DAIC - For the DAIC that have not been issued, indicate the status as “VOID” or “UNISSUED”.

Please include in the record the status of any DAIC indicated as unissued on the prior record. The DAIC record sent to DSA should include only the information requested. Do not include any information about determinations of compliance. DAIC records that include any information regarding compliance status will be destroyed, and a renewed request for the required information will be made to the CASp.

Once complete, please email your record to CASprogram@dgs.ca.gov, or mail your record to the DSA CASp Program at the mailing address provided in the CASp Examination, Certification, and Practice Standards Handbook.  
I certify under penalty of perjury that I am the person indicated above, that I have read and understood this application form, and the information I have entered on this application is true and complete to the best of my knowledge. I will provide DSA evidence of completion of continuing education, if requested. I further understand that any false, incomplete, or incorrect information may result in the delay of processing my certification renewal or in the denial of the renewal of my certification.  
  
Once you proceed to payment and leave your completed application, you will no longer be able to return to this document to revise any entries you have made. Make sure that all entries are accurate and complete before you proceed to payment. If you wish to review your application or make any changes you may access the back button to return to previous screens  
Back  
Proceed to Credit Card Payment  
Print Application and Mail Payment by Check

PAY BY CREDIT CARD  
DSA accepts only VISA and MasterCard.   
Amount   
$100 Application Evaluation Fee  
$200 Certification Fee  
  
Credit Card Charge  
$100 Application Evaluation Fee  
$200 Certification Fee  
Credit Card Information  
Cardholder's Name   
Credit Card Number (please use number only)   
CCV   
Expiration Date (MM/YY)   
Billing Address  
Street Address  
City   
State   
Zip Code  
Pay By Credit Card