

**INTERSTATE INDUSTRIALIZED BUILDINGS COMMISSION**  
 505 Huntmar Park Dr., Suite 210, Herndon, VA 20170 | (703) 481-2022

Designated agencies are responsible for submitting initial Registration Forms.  
 Manufacturers are responsible for notifying the Commission and designated agencies of any changes. See instructions for more details.  
**Attach Certificate(s) of Good Standing (aka Certificate of Existence, Certificate of Authorization)**

**PART I. BUSINESS ENTITY**

Legal Business Name:	FEIN:
Trade Name:	
Address:	
Phone:	Web Address (opt.):
Parent Co., City, ST (if applicable):	

**PART II. AUTHORIZED REPRESENTATIVE**

Name:	Title:
Email:	Phone:

**PART III. MANUFACTURING FACILITIES**

<b>Facility 1. Name/Designation:</b>			<input type="checkbox"/> ADD <input type="checkbox"/> EDIT <input type="checkbox"/> REMOVE
Physical Address:			
Mailing Address (if different):			
Phone:	Evaluation Agency:	Inspection Agency:	
<b>Facility 2. Name/Designation:</b>			<input type="checkbox"/> ADD <input type="checkbox"/> EDIT <input type="checkbox"/> REMOVE
Physical Address:			
Mailing Address (if different):			
Phone:	Evaluation Agency:	Inspection Agency:	
<b>Facility 3. Name/Designation:</b>			<input type="checkbox"/> ADD <input type="checkbox"/> EDIT <input type="checkbox"/> REMOVE
Physical Address:			
Mailing Address (if different):			
Phone:	Evaluation Agency:	Inspection Agency:	
<b>Facility 4. Name/Designation:</b>			<input type="checkbox"/> ADD <input type="checkbox"/> EDIT <input type="checkbox"/> REMOVE
Physical Address:			
Mailing Address (if different):			
Phone:	Evaluation Agency:	Inspection Agency:	
<b>Facility 5. Name/Designation:</b>			<input type="checkbox"/> ADD <input type="checkbox"/> EDIT <input type="checkbox"/> REMOVE
Physical Address:			
Mailing Address (if different):			
Phone:	Evaluation Agency:	Inspection Agency:	

## INSTRUCTIONS FOR COMPLETING REGISTRATION FORMS

### DESIGNATED AGENCIES –

- A completed registration form must be submitted whenever your agency contracts with a new client to provide evaluation and/or inspection agency services under the Commission’s program. Enclose a copy of the contract with the form.
- Under PART III of the form, list ONLY the manufacturing facilities for which your agency will provide inspection and/or evaluation agency services under the Commission’s program.
- A written notice required by Part V, Sections 2(A) and 3(A) of the UAP, must accompany the form if the manufacturer is requesting a change in agencies.

### MANUFACTURERS –

- Use the form to notify the Commission and your designated agency of changes. Refer to Part IV, Section 8(A) of the UAP for additional details including when the information must be provided.
- If you received a prefilled form, verify the information and return the form with any corrections to the Commission. **Manufacturers who fail to return the form may be removed from the list of registered facilities.**
- The prefilled form will list ALL of the manufacturing facilities owned by the business entity and registered with the Commission (i.e., under contract with a designated evaluation or inspection agency).

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### PART I. BUSINESS ENTITY

**Certificate(s) of Good Standing must be attached. The state-issued document (aka certificate of existence, certificate of authorization) shows that a corporation or limited liability company has met the statutory requirements and is authorized to do business in that state.**

**Legal Business Name.** Full business name of the entity as it appears on the legal document creating it.

**FEIN** (Federal Employer Identification Number). Nine-digit number assigned by IRS to the business.

**Trade Name.** Name of company if different from the legal business name (“doing business as” name).

**Address.** Full mailing address of the business.

**Parent Company.** If applicable, name and location (city, state) of the company that owns more than 50 percent of the voting shares of the business entity.

### PART II. AUTHORIZED REPRESENTATIVE

Name, title, email and phone number of the company officer who will serve as the primary business contact person.

### PART III. MANUFACTURING FACILITIES

ONLY list active facilities that are under contract with a designated evaluation and inspection agency and that intend to manufacture industrialized buildings or building components regulated by the Commission. A facility can be added at any time by submitting a revised form to the appropriate designated agency.

**Facility Name/Designation.** Name or plant number used by the business to identify the individual manufacturing facility – do not provide brand name(s).

**Physical Address.** Full physical address of the manufacturing facility.

**Mailing Address.** Full mailing address of the manufacturing facility if different from physical address.

**Evaluation Agency.** Name of the one or more evaluation agencies under contract to provide plan and design review services for buildings under the Commission’s program.

**Inspection Agency.** Name of the one or more evaluation agencies under contract to provide inspection services for buildings under the Commission’s program.

A **Certificate of Good Standing**, also called a "Certificate of Existence" or "Certificate of Authorization," is a state-issued document that shows that a corporation or limited liability company (LLC) has met the statutory requirements and is authorized to do business in that state. See sample below.

# Commonwealth of Virginia



## State Corporation Commission

### *CERTIFICATE OF GOOD STANDING*

*I Certify the Following from the Records of the Commission:*

That [redacted] Incorporated is duly incorporated under the law of the Commonwealth of Virginia;

That the date of its incorporation is February 26, 2009;

That the period of its duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



*Signed and Sealed at Richmond on this Date:  
February 1, 2012*

*Joel H. Peck*  
Joel H. Peck, Clerk of the Commission