The Association of Professional Engineers, Geologists and Geophysicists of Alberta
APEGGA

1500 Scotia One 10060 Jasper Avenue NW Edmonton AB T5J 4A2

CHANGE OF CHIEF OPERATING OFFICER
Declaration by Chief Operating Officer or His Authorized Designate for Existing Permit Holder

Permit Holder: _____ (Permit No.) _____
(Company Name)

I _____ Member No. *(if applicable)* _____occupy the

position of _____in the applicant's organization and in that position have authority and undertake to maintain an organization in which the practice of the professions indicated above can be conducted in accordance with requirements described in The Engineering, Geological and Geophysical Professions Act with specific reference to Parts 1 & 4 of the Act and Part 7 of the Regulations.

I further undertake:

(a) To notify the Registrar in writing forthwith if the APEGGA member(s) who has assumed responsibility for the professional practice ceases to be a full time employee, member of the firm or in any other way no longer meets the criteria to assume professional responsibility.

(b) To report on an annual basis the names of:

(i) The Chief Operating Officer or his designate taking corporate responsibility for the Permit Holder.

(ii) The APEGGA member(s) assuming responsibility for direction of the professional practice of the Permit Holder.

(c) To ensure that the partnership, corporation, or other entity has in place and will follow a professional practice management plan that is appropriate to its professional practice.

(d) If the Permit to Practice is cancelled for any reason or in circumstances where there are not members or licensees of APEGGA assuming responsibility for the professional practice of the Permit Holder, I undertake:

(i) To surrender forthwith all permit stamps and certificates to the Registrar

(ii) To remove the words “Engineering”, Geology”, or Geophysics”, or variations thereof, from the company name, OR deregister the Permit Holder entity at the Corporate of Central Registry of the Province of Alberta, if applicable.

_____ _____
(Signature) (Date)