

**APPLICATION TO RENEW INACTIVE REGISTRATION - BIENNIAL**  
**July 1, 2024 to June 30, 2026**

**CURRENT REGISTRATIONS EXPIRE JUNE 30, 2024.** Application must include \$90 fee and an original signature. Incomplete applications will be returned unprocessed and deemed not to have been received. **Please complete the following information.**

**PLEASE COMPLETE BOTH SIDES OF FORM**

<b>Name:</b> _____	<b>Certificate #</b> _____
<b>Address:</b> _____	
<b>City State Zip:</b> _____	
<b>Home Phone:</b> _____	
<b>Work Phone:</b> _____	
<b>Fax #:</b> _____	<b>E-mail Address:</b> _____ work <input type="checkbox"/> home <input type="checkbox"/>

**DISCLOSURE STATEMENTS (Pursuant to Section 1-137 of the Public Accountancy Act)**

1. Since the date of your last application, have you been charged or convicted of a felony in any court of any state or of the United States? (If yes, please attach a separate page giving disposition, charges, dates and locations.)  
 No.                       Yes.
  
2. Since the date of your last application, have you been charged or convicted of any crime, an element of which is dishonesty or fraud, in any court of any state or of the United States? (If yes, please attach a separate page giving disposition, charges, dates and locations.) *Title 288 Rules, Chapter 6 002*  
 No.                       Yes.
  
3. Since the date of your last application, have you had any application for certification or licensure denied, or any professional or vocational license or membership revoked or suspended, or been named in or subject to other disciplinary action regarding such a license or membership in this state or any other state, or by the United States government? (If yes, please attach a separate page providing details regarding the action taken, by what agency, dates and locations.)  
 No.                       Yes.
  
4. Since the date of your last application, have you been named in a lawsuit, binding arbitration, or federal or state administrative proceeding, pertaining to your work as a CPA? (If yes, please attach a separate page providing details regarding the action taken, by what entity, dates and locations.)  
 No.                       Yes.

<b>State Board Use Only</b> (4/24)	Date Recd. _____	Check # _____
	Rect. # _____	Amt./Code: \$90 (475102)

5. Since the date of your last application, have you had any violation of a court order?

No.  Yes.

6. Since the date of your last application, have you had any civil judgment, civil penalty, or binding arbitration, an element of which judgment, penalty, or award involves dishonesty, fraud, deceit, or misrepresentation? (If yes, please attach a separate page giving disposition, charges, dates and locations.) *Title 288 Rules, Chapter 6 002.*

No.  Yes.

7. List all other states in which you hold a CPA certificate and/or a license: (Attach a separate sheet to list more than three states)

	STATE	CPA CERT/LICENSE #	DATE EXPIRED	IN GOOD STANDING	
(1)	_____	_____	_____	YES <input type="checkbox"/>	NO <input type="checkbox"/>
(2)	_____	_____	_____	YES <input type="checkbox"/>	NO <input type="checkbox"/>
(3)	_____	_____	_____	YES <input type="checkbox"/>	NO <input type="checkbox"/>

8. a. EMPLOYMENT STATUS (check one):

I am not employed at all at this time.  
OR  I am employed by/at:

8. b. CPA FIRM STATUS (check one):

This IS a licensed CPA firm.  
 This is NOT a licensed CPA firm.

What type of business is this? \_\_\_\_\_

Firm/Employer Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

Check one:  I am an owner/partner/shareholder/member of the above. OR  I am an employee of the above.

The **practice of public accountancy** means you are offering to the public to perform one or more kinds services as a permit holder involving: the use of accounting or auditing skills, including the issuance of reports on financial statements which state or imply any level of assurance as to the reliability of any financial statements associated with such assurances; and/or management, advisory, financial, or consulting services, or the preparation of tax returns or the furnishing of advice on tax matters.

9. Do you practice public accountancy in the state of Nebraska? *PAA 1-135; Rule Reference: Title 288, Chapter 3, Sections 001.09 and 001.18, and Chapter 7.003.01.*

No.  Yes. (You must have an active permit to do so and must be in a licensed CPA firm.)

**ALL APPLICANTS MUST SIGN/DATE FORM & INCLUDE FEE BEFORE RETURNING.**

I hereby certify that the information provided on this application is true and accurate to the best of my knowledge. I understand that this inactive registration expires June 30, 2026. I understand that I cannot hold myself out to the public as a practicing CPA, including the display or use of any information to that effect. I also understand and acknowledge that I cannot practice public accountancy in the state of Nebraska without an active permit to practice and an office registration.

Date \_\_\_\_\_ Signature \_\_\_\_\_

Amount Remitted: \$90  
Please make checks payable to: Nebraska Board of Public Accountancy