

Mississippi Secretary of State

125 South Congress St., P. O. Box 136, Jackson, MS 39205-0136

ADMINISTRATIVE PROCEDURES NOTICE FILING

AGENCY NAME Mississippi State Board of Architecture, Landscape Architecture Advisory Committee		CONTACT PERSON John Cothron	TELEPHONE NUMBER 601-856-6760	
ADDRESS 2 Professional Parkway #2B		CITY Ridgeland	STATE MS	ZIP 39157
EMAIL jcothron@msboa.ms.gov	SUBMIT DATE 11/17/21	Name or number of rule(s): Title 30, Part 202: Landscape Architecture Advisory Committee to the Mississippi State Board of Architecture		

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: Amend Rules 1.2 and 1.5 to comply with the statute; amend Rule 1.10 to allow for a waiver of the CLARB Certificate for reinstatement applicants; amend Rule 1.11 to move language regarding preliminary documents from the commentary to the rule text and to allow for electronic and digital signatures; amend Rule 1.13 to bring the rule into compliance with the "Universal Recognition of Occupational Licenses Act" (HB 1263, 2021 Regular Session); and amend Rule 3.1 to incorporate by reference the disciplinary rules for the Board of Architecture. Specific legal authority authorizing the promulgation of rule: Miss. Code Ann. § 73-2-1 et seq.
List all rules repealed, amended, or suspended by the proposed rule: 1.2, 1.5, 1.10, 1.11, 1.13, 3.1.

ORAL PROCEEDING:

☐ An oral proceeding is scheduled for this rule on Date: _____ Time: _____ Place: _____

☒ Presently, an oral proceeding is not scheduled on this rule.

If an oral proceeding is not scheduled, an oral proceeding must be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) or more persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address, email address, and telephone number of the person(s) making the request; and, if you are an agent or attorney, the name, address, email address, and telephone number of the party or parties you represent. At any time within the twenty-five (25) day public comment period, written submissions including arguments, data, and views on the proposed rule/amendment/repeal may be submitted to the filing agency.

ECONOMIC IMPACT STATEMENT:

☒ Economic impact statement not required for this rule. ☐ Concise summary of economic impact statement attached.

TEMPORARY RULES

____ Original filing
____ Renewal of effectiveness
To be in effect in ____ days
Effective date:
____ Immediately upon filing
____ Other (specify): ____

PROPOSED ACTION ON RULES

Action proposed:
____ New rule(s)
☒ Amendment to existing rule(s)
____ Repeal of existing rule(s)
____ Adoption by reference
Proposed final effective date:
☒ 30 days after filing
____ Other (specify): ____

FINAL ACTION ON RULES

Date Proposed Rule Filed: _____
Action taken:
____ Adopted with no changes in text
____ Adopted with changes
____ Adopted by reference
____ Withdrawn
____ Repeal adopted as proposed
Effective date:
____ 30 days after filing
____ Other (specify): ____

Printed name and Title of person authorized to file rules: John Cothron, Executive Director

Signature of person authorized to file rules: *John Cothron*

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The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.