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	cipal office in the localities of a Chapter or Chapters	
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CITY OF LOPAIN

JUL 22 1946

STATE OF OHIO

DATE July 18 1946

EDMUND R. PURVES

Cleveland-

QUESTIONNAIRE FOR ARCHITECTS' ROSTER AND/OR REGISTER OF ARCHITECTS QUALIFIED FOR FEDERAL PUBLIC WORKS

TYPING IS MANDATORY. PARTNERSHIPS SHOULD MAKE A JOINT RETURN ONLY.

Pink copy is to be retained by the author; other copies to be mailed to The American Institute of Architects, 1741 New York Avenue, N. W., Washington 6, D. C.

l. (a	a) FIRM	(individual or partnership)	ALFRED L FAUVER		·
(b) FORM	ER FIRM, if any.			
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3. Y	EAR EST.	ABLISHED 19	46		
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(b)		5 yrs- Co	rnell Architectur	e	
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(c)	Experier	nce Prior to Own 1	Practice		
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(f)	Architectural Licenses (Give State, Number and Y	ear Issued)	
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(a)	STRUCTURAL ENGINEERS		
	Name of Firm or Individual		
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(b)	HEATING & VENTILATING	ENGINEERS	
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	Name of Firm or Individual		
	Business Address		
			
(e)	LANDSCAPE ARCHITECTS		
	Business Address		·

SUMMARY OF PROJEC	T COSTS:		
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9. P	HOTOGRAPHS/PHOTOSTATS:
	The author submits herewith photographs or photostats (size 8" x 10") of several buildings for which he has been the Architect, as follows: (N.C.A.R.B. presentation acceptable.)
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10.	COLLABORATION WITH JUNIOR ARCHITECTS:
(a)	If an established individual or firm, are you willing to collaborate with other firms or individuals which would permit junior architects to qualify and help further their professional careers?
	yes
(b)	If in private practice at this time, name associates (if additional architects are to be added to your organization) for the purpose of qualifying:
(c)	If not in private practice at this time, name established architect or firm with whom you have agreed to collaborate, for the purpose of qualifying:
11.(a)	I/We wish to be included in the Architects' Roster
(b)	I/We would like to be 🔼 considered for the Register of Architects Qualified for Federal Public Works
I/We	hereby certify that the above is a true statement of facts.
	Name of Firm or Individual Alfred L Fauver
	Signed by all Principals:
	/· /

NOTE: The American Institute of Architects
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to the profession. The A.I.A. has not checked
this questionnaire for accuracy and assumes
this questionnaire for accuracy and made
no responsibility as to the statements made
herein.

CITY Lorain		COUN	TY Lorai	<u>n</u>
STATE Ohio				
DATE October	25,	1947		

QUESTIONNAIRE FOR ARCHITECTS' ROSTER

TYPING IS MANDATORY. PARTNERSHIPS SHOULD MAKE A JOINT RETURN ONLY.

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	Re	elations,	The American	Institute o	of Architects,	1741 New	York A	Avenue, N	1. W., 1	Washington 6,	D. C.
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. P	ERSONAL HISTOR	RIES	Name	of Principal	Name of Principal
	OF PRINCIPALS		A L Fauver		
	Fu of	rnish data firm ind	a complete, but ke lividually; if mo	ep to essentials. De ore than two, app	scribe each member pend extra sheets.
(a)	Date of Birth Ja	n 20,	1911		
(b)	Education 3 yr	s- Ham	ilton Colle	де	
(~)	5 yrs-	Cornel	l Univ-B.Ar Penn-M.Arc	ch 136	
	<u>1 yr-0</u>	UIV OI	renn-m.Arc		
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(d)	Commenced PracticeJ	une ' 4	0		
(e)	Number of Years a Principal	3 yr	S		

(f)	Architectural Licenses (Give State, Number and Year Issued.)
	Illinois '39 thru '41
	Ohio # 1375 '41 to present
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(6)	Lorain Builders Exchange
(h)	Service in World Wars I and II. (Append data if desired.)
	Air Corps- Weather Service- 3½ yrs (2½ yrs Central Pacific)
	(22) ID OCHOLAL LAGILIO)
(i)	Civic Activities
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	Lorain Chamber of Commerce
	Solicitor- Community Fund
	Solicitor- Red Cross
(a)	(If a member of your staff, so state) STRUCTURAL ENGINEERS
` '	
	Name of Firm or Individual Frank Eroskey & Assoc. Business Address Rose Bldg- Cleveland Ohio
	Business Address Rose Bldg-Cleveland Ohio
(b)	HEATING & VENTILATING ENGINEERS
	Name of Firm or Individual Paul Fleming
	Name of Firm or Individual Faut Fleming Business Address 1900 Euclid Bldg- Cleveland Ohio
	Business Address 12000 Buolifu Billion
(c)	ELECTRICAL ENGINEERS
	Name of Firm or Individual none
	Business Address
(d)	PLUMBING OR SANITARY ENGINEERS
	Name of Firm or Individual none Business Address
(e)	LANDSCAPE ARCHITECTS
	Name of Firm or Individual none Business Address
	Dubilion Multipa

OTHER REMARKS RE QUALIFICATIONS:
(Append extra sheet if necessary)

7. REPRESENTATIVE WORK FOR WHICH YOU WERE OR ARE ARCHITECTS; OR WERE OR ARE ASSOCIATED WITH OTHERS:

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8. P	HOTOGRAPHS/PHOTOSTATS (Not Mandatory):
•	The author submits herewith photographs or photostats (size 8" x 10") of several buildings for which he has been the Architect, as follows: (N.C.A.R.B. presentation acceptable.)
9. C	OLLABORATION WITH OTHER ARCHITECTS:
(a)	As an established individual or firm, are you willing to collaborate with other firms or individuals?
	Yes
(b)	Are you and/or your firm agreeable to accepting supervision of work where designs are produced by others— or vice versa? Yes
(c)	List firms (or individuals) with which you are associated at present or have an associate or working agreement: (Please furnish a letter from the other party verifying the association.)
	J E Meyer, AIA (In same office only)
10.	I/WE DO 🗷 DO NOT 🗆 DESIRE TO HAVE OUR (THIS) QUESTIONNAIRE MADE AVAILABLE TO GOVERNMENTAL AGENCIES.
I/We	hereby certify that the above is a true statement of facts.
	Name of Firm or Individual
	Signed by all Principals:

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CITY.L	orain	COUNTY	Lorain
STATE.	Ohio		
DATE	June 6, 194	9 .	

				SUPPLEMENTA	L DATA	SHEET	
			QUEST	IONNAIRE FOR	ARCHI'	rects' ros	STER
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				e author; original and other can Institute of Architects,			
1.	(a)	FIRM	(individual or partnership)	A. L. Fauver -	Register	ed Architect	
	(b)	FORM	ER FIRM, if a	ny			
2.	BUS	SINESS	ADDRESS	945 Broadway, Lora	in, Ohio		
3.				K FOR WHICH YOU WE IERS SINCE FILING OR			OR WERE OR ARE AS-
							Architect or
		Nam	e of Project	Location	Date	\mathbf{Cost}	Associate Architect
В	oard	of Edi	ucation Addi	tion Lorain, Ohio	1948	\$25,000	Architect
4	Ohio.	Publi	c.S vice.Al	teration - Lorain, C	1949	15,000	Architect
	Smit	h & Ge:	rhart Altera	tion - Lorain, Ohio	1948	15,000	Architect
i	Spai	d Insu	rance Bldg.	Lorain, Ohio	1948	12,000	Architect
4.	ADI			TURAL LICENSES SINC	E FILING (DRIGINAL QUEST	TIONNAIRE:
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I/	We he	ereby cer	tify that the ab	ove is a true statement of fa	icts.		
			N	ame of Firm or Individual	A. L. Fa	uver - Registe	ered Architect
			Si	gned by all Principals:	<u> </u>	h: Fac	
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(Use reverse side for additional information)



STATE	Ohio	
		COUNTY Lorain
DATE	August 31,	

ARCHITECTS' ROSTER

QUESTIONNAIRE

TO EVERY ARCHITECT IN THE UNITED STATES AND ITS POSSESSIONS:

The Architects' Roster is maintained by The American Institute of Architects as a service to the profession as a whole and to agencies of the United States Government. Every registered architect, whether or not a member of The Institute, is eligible for inclusion in the Roster. The Institute maintains custody of the Roster, keeps it up to date and in good order for use. The Roster is available to any representative of the Government and to representatives of foreign governments in Washington. Reference may be made to The Architects' Roster in negotiations with government agencies and other interested parties. Experience with the Roster since its establishment in 1946 has shown its usefulness. Growing out of an earlier Register of architects qualified for public works, The Roster provides at The Octagon an accurate, current record of the qualifications and achievements of members of the profession. It allows a positive and helpful response to requests for factual information on architects, and in that way constitutes a service to the profession.

The American Institute of Architects assumes no responsibility for the accuracy of statements made in this Questionnaire. The obligation to maintain this record as a current description of an architectural firm rests with the firm, and supplementary record forms are available for this purpose.

PARTNERSHIPS SHOULD MAKE A JOINT RETURN ONLY.

Original and one copy to be mailed to THE ARCHITECTS' ROSTER, The American Institute of Architects, 1735 New York Avenue, N. W., Washington 6, D. C. One copy to be retained by the author.

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PERSONAL HISTORIES OF PRINCIPALS

	A. L. Fauver		
	NAME OF PRINCIPAL		NAME OF PRINCIPAL
Date	of Birth January 20, 1911		
Place	of Birth Lorain, Ohio		
Educa	tion 3 yrs. Hamilton Colle	ege	
	5 yrs. Cornell Univ -		
	·		
-	rience Prior to Own Practice		4
(0	Dive architect or architectural firm affili	ations, positions	held, and approximate dates of employment
U H	arold Parker ATA Sandusky (). 36-137	held, and approximate dates of employment
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Memi	tectural Licenses (Give State, Numberlinois '39 thru '41 hio #1375 '41 to present bership in Professional Societies of the Corps, Weather Service— (2½ yrs, Central Pacific) Activities Lorain Lions Club	er and Year issuand Offices H	ed.)
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3M-52

5	REMARKS	CONCERNING	QUALIFICATIONS	OF	FIRM
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	3 members of the offi	ce staff; approximately 1000 so. ft. of office space
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0	NSULTANTS USUALLY EMPLOYED	O: (If a member of your staff, so state.)
	STRUCTURAL ENGINEERS	
	SIROCIORAL ENGINEERO	
		Prople Tracker & Acces
	Business Address	Rose Bldg - Cleveland, Chio
	Business Address HEATING AND VENTILATING E	Rose Bldg - Cleveland, Chio
	Business Address HEATING AND VENTILATING E	Rose Bldg - Cleveland, Chio NGINEERS Superior Engineering Co.
	Business Address HEATING AND VENTILATING E	Rose Bldg - Cleveland, Chio NGINEERS Superior Engineering Co.
	Business Address HEATING AND VENTILATING EI Name of Firm or Individual Business Address ELECTRICAL ENGINEERS	Rose Bldg - Cleveland, Chio NGINEERS Superior Engineering Co. 2063 East Fourth Street, Cleveland, Chio
	Business Address HEATING AND VENTILATING EN Name of Firm or Individual Business Address ELECTRICAL ENGINEERS Name of Firm or Individual	Rose Bldg - Cleveland, Chio NGINEERS Superior Engineering Co. 2063 East Fourth Street, Cleveland, Chio Superior Engineering Co.
	Business Address HEATING AND VENTILATING EN Name of Firm or Individual Business Address ELECTRICAL ENGINEERS Name of Firm or Individual	Rose Bldg - Cleveland, Chio NGINEERS Superior Engineering Co. 2063 East Fourth Street, Cleveland, Chio
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	Business Address HEATING AND VENTILATING EN Name of Firm or Individual Business Address ELECTRICAL ENGINEERS Name of Firm or Individual Business Address PLUMBING OR SANITARY ENG	Rose Bldg - Cleveland, Ohio NGINEERS Superior Engineering Co. 2063 East Fourth Street, Cleveland, Ohio Superior Engineering Co.
	Business Address HEATING AND VENTILATING EN Name of Firm or Individual Business Address ELECTRICAL ENGINEERS Name of Firm or Individual Business Address PLUMBING OR SANITARY ENG Name of Firm or Individual	Rose Bldg - Cleveland, Chio NGINEERS Superior Engineering Co. 2063 East Fourth Street, Cleveland, Chio Superior Engineering Co. INEERS Superior Engineering Co.
	Business Address HEATING AND VENTILATING EN Name of Firm or Individual Business Address ELECTRICAL ENGINEERS Name of Firm or Individual Business Address PLUMBING OR SANITARY ENG Name of Firm or Individual	Rose Bldg - Cleveland, Chio NGINEERS Superior Engineering Co. 2063 East Fourth Street, Cleveland, Chio Superior Engineering Co.
	Business Address HEATING AND VENTILATING EN Name of Firm or Individual Business Address ELECTRICAL ENGINEERS Name of Firm or Individual Business Address PLUMBING OR SANITARY ENG Name of Firm or Individual Business Address Business Address	Rose Bldg - Cleveland, Chio NGINEERS Superior Engineering Co. 2063 East Fourth Street, Cleveland, Chio Superior Engineering Co. INEERS Superior Engineering Co.
	Business Address HEATING AND VENTILATING EN Name of Firm or Individual Business Address ELECTRICAL ENGINEERS Name of Firm or Individual Business Address PLUMBING OR SANITARY ENG Name of Firm or Individual Business Address LANDSCAPE ARCHITECTS Name of Firm or Individual	Rose Bldg - Cleveland, Chic NGINEERS Superior Engineering Co. 2063 East Fourth Street, Cleveland, Chic Superior Engineering Co. INEERS Superior Engineering Co.
	Business Address HEATING AND VENTILATING EN Name of Firm or Individual Business Address ELECTRICAL ENGINEERS Name of Firm or Individual Business Address PLUMBING OR SANITARY ENG Name of Firm or Individual Business Address LANDSCAPE ARCHITECTS Name of Firm or Individual Business Address	Rose Bldg - Cleveland, Chio NGINEERS Superior Engineering Co. 2063 East Fourth Street, Cleveland, Chio Superior Engineering Co. INEERS Superior Engineering Co.
	Business Address HEATING AND VENTILATING EN Name of Firm or Individual Business Address ELECTRICAL ENGINEERS Name of Firm or Individual Business Address PLUMBING OR SANITARY ENG Name of Firm or Individual Business Address LANDSCAPE ARCHITECTS Name of Firm or Individual Business Address OTHER (Civil, Foundation or Mechout Engineers, etc.)	Rose Bldg - Cleveland, Chio NGINEERS Superior Engineering Co. 2063 East Fourth Street, Cleveland, Chio Superior Engineering Co. INEERS Superior Engineering Co.

7 REPRESENTATIVE WORK FOR WHICH YOU WERE OR ARE ARCHITECTS; OR WERE OR ARE ASSOCIATED WITH OTHERS: (In left margin, mark *—U. S. Government projects, **—projects not yet complete.)

Name and type of project	Location	Date	Cost	Indicate whether as Architect or Associate Architect
Nat. Bank Alt	Lorain, 0.	141	\$ 12,000	Archt
Dr. Kingsley Office	Lorain, 0.	146	25 , 000	Archt
Del. Meth. Church	Lorain, 0.	Pres.	85 , 000	Archt.
LTRR Office	Lorain, 0.	148	30,000	Archt.
Wittow Res.	Lorain, 0.	152	45,000	11
Lorain Public Librar	y Lorain, O.	Pres	350 , 000	Assoc. Archt.
Neighborhood House	Lorain, 0.	Pres.	100,000	11 11
L. Z. Hoffer, Res.	Lorain, Chio.	${ m Pres.}$	25 , 000	Archt.
Avon Lake Steel Fab.	Avon Lake	Pres.	45,000	Assoc. Archt.
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8 PHOTOGRAPHS/PHOT	OSTATS
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	Not mandatory. Submit herewith photogry you have been the Architect, as follows:		(N.C.A.R.B. presentation	acceptable.
			••••••	
9 co	DLLABORATION WITH OTHER ARCHITECTS:			
а	As an established individual firm, are you willing	to collaborate with other fir	ms or individuals?	
	Yes			•
b	Are you and/or your firm agreeable to accepting vice versa?			
C	List firms (or individuals) with which you are as (Please furnish a letter from the other party		an associate or workin	g agreement
	J. E. Meyer, AIA (In same	e office only)		
				•
	•			
	WE OUTSTANDANTE MAY BE MADE AVAIL	ADLE TO COVEDNMENT	yes	no
lO 11	IIS QUESTIONNAIRE MAY BE MADE AVAI	LABLE 10 GOVERNMENT	AL AGENCIES X	
he und	ersigned hereby certify that the above is a true sta	tement of facts.		
	Name of Firm or Individu	al		
	Signed by all Principal	s:		
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		••••		