NORTHERN TERRITORY OF AUSTRALIA BUILDING PRACTITIONERS BOARD

Application for registration as a building practitioner – Corporation – Building Contractor

Use this form to apply for registration as a corporation building contractor in accordance with section 24B and 22A of the *Building Act 1993* (the Act).

Please see the building practitioner's board <u>website</u> for further information about the application process and the relevant fee.

Category of registration applied for (select applicable)							
Building Contractor Residential							
Restricted (Flats of ur	storeys)		Unrestricted				
Corporation details (please note the p	ostal address wi	ill be listed c	on the pu	blic register of	building practi	itioners)
Corporation name:							
Registered business/	trading name:						
ACN:			ABN:				
Business address:							
Suburb:				State:		Postcode:	
Is your postal address the same as above? If no, complete below:							
Postal address:							
Suburb:				State:		Postcode:	
Contact details							
Contact person:							
Phone number:			Mobil	e numbe	er:		
Email address:							
Director and Manag	ement details						
List the names of all directors and persons concerned in the management or conduct of the corporation and the positions they hold (attach list if necessary). Note: must be supported with a copy of the current ASIC extract dated within 28 days from the date of this application.							
Name		Position	Date o	f birth	Address		



Director/s acceptant	ce control of the con					
All director/s concerned in the management or conduct of the corporation must complete the below. If more than three directors please photocopy and attach to the application.						
Director 1						
Full name:						
I hereby declare that I am a director of the corporation described in this application. I understand the responsibilities imposed upon me by the <i>Building Act 1993</i> . I understand I am responsible for <u>all</u> work undertaken by the corporation. I undertake to notify the Building Practitioners Board in writing of any changes affecting the corporation's registration in accordance with section 25A of the Act.						
Director signature:		Date:				
Director 2						
Full name:						
I hereby declare that I am a director of the corporation described in this application. I understand the responsibilities imposed upon me by the <i>Building Act 1993</i> . I understand I am responsible for <u>all</u> work undertaken by the corporation. I undertake to notify the Building Practitioners Board in writing of any changes affecting the corporation's registration in accordance with section 25A of the Act.						
Director signature:		Date:				
Director 3						
Full name:						
I hereby declare that I am a director of the corporation described in this application. I understand the responsibilities imposed upon me by the <i>Building Act 1993</i> . I understand I am responsible for <u>all</u> work undertaken by the corporation. I undertake to notify the Building Practitioners Board in writing of any changes affecting the corporation's registration in accordance with section 25A of the Act.						
Director signature:		Date:				
Nominee/s acceptan	ce					
All nominees for the corporation must be listed below. If the following nominees change or cease during the registration period the corporation is required to notify the Building Practitioners Board within 7 days. If more than three nominees photocopy and attach to the application.						
Nominee 1						
Full name:						
NT registration no:	Expiry date:					
I hereby accept nomination as the registered practitioner for the corporation described in this application. I understand the responsibilities imposed upon me by the <i>Building Act 1993</i> during the period that I am the registered practitioner for this corporation.						
Nominee signature:		Date:				

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Nominee 2						
Full name:						
NT registration no:		Expiry date:				
I hereby accept nomination as the registered practitioner for the corporation described in this application. I understand the responsibilities imposed upon me by the <i>Building Act 1993</i> during the period that I am the registered practitioner for this corporation.						
Nominee signature:				Date:		
Nominee 3						
Full name:						
NT registration no:		Expiry date:				
I hereby accept nomination as the registered practitioner for the corporation described in this application. I understand the responsibilities imposed upon me by the <i>Building Act 1993</i> during the period that I am the registered practitioner for this corporation.						
Nominee signature:				Date:		
Disclosures						
Section 24B(2)(b) of the <i>Building Act 1993</i> requires all directors and other persons concerned with the management or conduct of the corporation to prove they are fit and proper persons to be registered. If you answer YES to any questions below, please provide copies of all relevant documentation in support.						
Have <u>any</u> Directors or <u>any</u> other persons concerned in the management or conduct of the corporation:						
In the last 5 years, been declared an undischarged bankrupt or entered into any current Part IX agreement or Part X arrangement or agreement under the <i>Bankruptcy Act 1966</i> ?						
If yes, provide details	s below					
In the last 5 years, become bankrupt or have entered into a Part IX agreement or Part X arrangement or agreement under the <i>Bankruptcy Act 1966</i> ?					Yes / No	
If yes, provide details below						
In the last 5 years, been a Director, Secretary or a person in a position to control or substantially influence a company's conduct or affairs (such as a shareholder with a significant shareholding, a financier or a senior employee) within 12 months of that company being placed in receivership, administration, official administration, under a deed of company arrangement, in liquidation or wound up for the benefit of creditors?					Yes / No	
(If yes, please provid	e registration number)					

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In the last 10 years, been convicted of a criminal offence (other than a minor traffic offence) or are any court proceedings pending?						
If yes, provide details below						
Been disqualified from holding an occupational lice licence or certificate cancelled or suspended or certificates or registrations)?	•	•	Yes / No			
If yes, provide details below						
In respect of any work done in an equivalent position for any breach of rules, professional conduct or code	•	led or cautioned	Yes / No			
If yes, provide details below						
Directors declaration						
I, (full name of director 1):						
I, (full name of director 2):						
Hereby apply for a building practitioner registration	on behalf of the followin	g declared corpor	ation:			
Corporation name:						
Solemnly and sincerely declare that:						
I am authorised to make this declaration on behalf of the corporation;						
• All statements and information contained in this application are true and correct to the best of my knowledge by virtue of the Oaths, Affidavits and Declarations Act 2010; and						
• I give the Northern Territory Building Practitioners Board consent to make any inquiries and to receive and disclose any information which is relevant to the corporation's initial and ongoing eligibility to be registered as a building practitioner;						
 I acknowledge that information (name, business address and telephone number) will be placed on a register that is open to the public; I/We accept that failure to supply information required on this form may delay processing of this 						
 application; I/We understand and acknowledge my legal obligations under the <i>Building Act 1993</i> if registration is granted; 						
• And I make this declaration by virtue of the Oath, Affidavits and Declarations Act 2010 knowing that the declaration is true in every particular and with the knowledge that it is an offence to make a statutory declaration that is false in any material particular.						
This declaration is made at: (location)		on: (date)				
Director 1 signature: Director 2 signature:						
Note: Under the <i>Oaths</i> , <i>Affidavits and Declarations</i> Act 2010 a person wilfully making a false statement or altering a statement, in a statutory declaration is guilty of a crime and is liable to a penalty or imprisonment, or both.						

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Checklist					
Prescribed application fee – See the <u>application forms</u> page for current fee.					
Completed and signed declaration.					
Supporting documents if you ticked YES to any disclosure questions above.					
Net assets certificat	e endorsed by an Accountant attached.				
You must provide an original net Assets Certificate, as certified by a registered accountant that the corporation has "Net Tangible Assets" of \$50,000 or more, as required by the Building Regulations 1993. The corporation must maintain at least that minimum amount during the entire period of registration.					
	n at any time require a building contractor to produce evidence to assess requirement to hold the minimum Net Tangible Assets of \$50,000 in ction 25B.				
Current ASIC company extract attached (within 28 days from date of this application).					
Copy of current business name certificate attached.					
Privacy statement					
	ory Government and the Building Practitioners Board of the Northern Territn Privacy Principals scheduled by the <i>Information Act</i> 2002.	ory complies			
Lodgement					
Complete application	ns can be lodged in person, email or via post at a Territory Business Centre l	below:			
Darwin:	Darwin Corporate Park, Ground Floor, Building 3, 631 Stuart Highway Berrimah				
Katherine:	Big Rivers Government Centre, 5 First Street, Katherine				
Tennant Creek:	Shop 2, Barkly House, Cnr Davidson and Paterson Streets, Tennant Creek				
Alice Springs:	Ground Floor, The Green Well Building, 50 Bath Street Alice Springs				
1800 193 111	800 193 111 <u>territorybusinesscentre@nt.gov.au</u> GPO Box 9800 Darwin NT 0801				
Payment details					
Cash (in perse	lodgement of this application form. Payment can be made by: on only); or de out to Receiver of Territory Monies - in person/mail); or				
	Visa or MasterCard accepted in person or over the phone). Note: A staff member siness Centre will contact you via phone for payment.	from the			

Receipt number:

Amount paid:

Payment date: