

**NORTHERN TERRITORY OF AUSTRALIA
BUILDING PRACTITIONERS BOARD**

**APPLICATION FOR RENEWAL OF REGISTRATION AS A
BUILDING PRACTITIONER - INDIVIDUAL**

SECTION 1 PERSONAL DETAILS

FAMILY NAME (Surname)

GIVEN NAME (First name) OTHER NAMES (Middle names)

PREFERRED NAME

HAVE YOU CHANGED YOUR NAME SINCE REGISTRATION OR PREVIOUS RENEWAL? Yes No
IF 'YES' THEN PLEASE PRODUCE EVIDENCE E.G. MARRIAGE CERTIFICATE OR OTHER EVIDENCE.

GENDER Male Female

SECTION 2 CONTACT DETAILS

BUSINESS HOURS PHONE NUMBER AFTER HOURS PHONE NUMBER

FAX NUMBER MOBILE PHONE NUMBER

EMAIL

SECTION 3 ADDRESS DETAILS

HOME ADDRESS

POSTAL ADDRESS

For the service of notices and documents

Please note that this address will be listed on the public register of building practitioners

FOR OFFICE USE ONLY

Receipt Date

Amount Received By

SECTION 4 SUB-CATEGORY OF PRACTITIONER

I am currently registered as a (please select appropriate registration category):-

- BUILDING CERTIFIER
 RESIDENTIAL
 UNRESTRICTED
- BUILDING CONTRACTOR RESIDENTIAL
 RESTRICTED
 UNRESTRICTED
- CERTIFYING ARCHITECT
- CERTIFYING ENGINEER
 STRUCTURAL
 HYDRAULIC
 MECHANICAL
- CERTIFYING PLUMBER & DRAINER
- CERTIFYING PLUMBER & DRAINER DESIGN

My current registration number is

SECTION 5 FIT and PROPER

- | | YES | NO |
|---|--------------------------|--------------------------|
| 1. Are you an undischarged bankrupt or have you entered into any current Part IX agreement or Part X arrangement or agreement under the Bankruptcy Act 1966? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Have you in the last 5 years become bankrupt or entered into a Part IX agreement or Part X arrangement or agreement under the <i>Bankruptcy Act</i> 1966? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Have you in the last 5 years been convicted of a criminal offence (other than a minor traffic offence) or are any court proceedings pending? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Have you ever been disqualified from holding an occupational licence or certificate, or had an occupational licence or certificate cancelled, suspended or refused (including interstate licences, certificates or registrations)? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. In respect of any work you have done in an equivalent position, have you ever been fined, reprimanded or cautioned for any breach of rules, professional conduct or code of ethics? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Have you 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? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Have you ever held or do you currently hold a registration as a building practitioner in any other state?
If yes please provide details:
"Category" "state" date last registered" | <input type="checkbox"/> | <input type="checkbox"/> |

If you have ticked YES to any of above, please provide full details of all relevant documentation on a separate sheet of paper in the form of a statutory declaration clearly outlining the date, reasons and

outcomes.

SECTION 6 PAST PERFORMANCE

Applicants are required to have shown by performance reporting to have performed satisfactorily, pursuant to section 24F(1)(d) of the Building Act.

To assist the Board in determining if this requirement has been met, please provide a project list detailing the individual projects your company has been involved in over the past 2 years. The list should include the company’s level of involvement and the full address of the project.

The following questions apply to you as an individual practitioner. Please tick yes or no in the relevant box to the following questions, to the best of your knowledge.

The Building Practitioners Board will have access to the building records held by the Department of Lands, Planning, and the Environment in order to consider your application for renewal.

- | | YES | NO |
|--|--------------------------|--------------------------|
| 1. In the past two years, been party to a dispute concerning building work with any client or subcontractor in any court proceedings (whether in Australia or elsewhere) or through the Office of Consumer Affairs, Commissioner of Residential Building Disputes, or the Community Justice Centre? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. In the past two years, been party to rapid adjudication proceedings under the Construction Contracts (Security of Payments) Act (or equivalent in Australia or elsewhere)? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. In the past two years, received notification from the Director of Building Control concerning a complaint pursuant to section 29 of the Building Act (or equivalent in Australia or elsewhere)? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. In the past two years, been the subject of an audit conducted by the Director of Building Control pursuant to section 34A of the Building Act (or equivalent in Australia or elsewhere)? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. In the past two years, been the subject of an investigation or inquiry concerning building work (or equivalent in Australia or elsewhere)? Please include an investigation or inquiry by a professional body such as the Australian Institute of Building Surveyors, Engineers Australia, Australian Royal Institute of Architects or associations such as Master Builders Association or Housing Industry Association. | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. In the past two years, has any claim under your professional indemnity insurance, or under a Residential Building Cover Scheme (or an equivalent scheme in Australia or elsewhere) been allowed? | <input type="checkbox"/> | <input type="checkbox"/> |

If you answered yes to any of the questions above, please provide a summary of the circumstances. Where a matter has concluded please provide full details:

SECTION 7 FINANCIAL REQUIREMENTS – Building Contractor Residential ONLY

Applicants for renewal of registration as a Building Contractor must provide an **ORIGINAL** Net Assets Certificate, as certified by a registered accountant that you have “Net Tangible Assets” of \$50,000 or more, as required by the Building Regulations. Building Contractors must maintain at least that minimum amount during the entire period of registration.

Note: The Building Practitioners Board can require a Building Contractor to produce evidence to assess compliance with the requirement to hold the minimum Net Tangible Assets of \$50,000 in accordance with section 25B.

SECTION 8 INSURANCE REQUIREMENTS

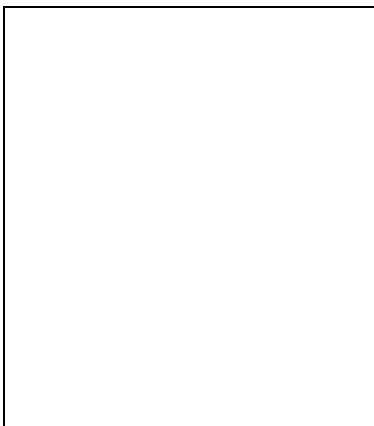
Applicants applying for registration in any of the categories/subcategories below, are required to hold current Professional Indemnity Insurance Policy in accordance with the following schedule.

Building Certifier Unrestricted, Certifying Engineer Structural and Certifying Plumber & Drainer Design	\$1 Million
Building Certifier Residential	\$500,000
Certifying Engineer Mechanical, Certifying Engineer Hydraulic and Certifying Architect	\$100,000

Evidence of current cover must be submitted with your application.

SECTION 9 PHOTO REGISTRATION CARD

An optional wallet sized registration card which will include your photograph is offered, at no additional cost. If you wish to obtain this card, please attach a photo to this application form using tape on the rear of the photo only.



Photos must

- Head and shoulders
- Be no more than 6 months old
- Be passport quality
- Be on photo paper
- Have clear white background
- 4.5 – 5 cm high, 3.5 – 4 cm wide
- Not have any border
- Have your full name on the back

Note: Alternatively, you may email a photo to bbp@nt.gov.au, giving your full name. If you email the photograph, please write ‘photo emailed’ in the space provided for the photograph.

PRIVACY

The Building Practitioners Board of the Northern Territory (NT) is collecting the information on this form to determine whether or not you are eligible for renewal of registration as a building practitioner in accordance with the provisions of the *Building Act*. The names, business addresses and business telephone numbers of registered building practitioners will be entered into a register of building practitioners. This register will be available to the public via our internet site or upon request. The Building Practitioners Board collects personal information in accordance with the Northern Territory Government’s privacy statement available at www.nt.gov.au/ntg/disclaimer.shtml. For more information please contact the Building Practitioners Board, or the Building Advisory Services on (08) 8999 6435.

SECTION 10 DECLARATION

Oaths, Affidavits and Declarations Act

I, _____ (full name) do solemnly and sincerely declare that the particulars contained in this application and following statements are true and correct and all of the attachments are the original or a complete and accurate copy of the original.

- I give the Northern Territory Building Practitioners Board consent to make any inquiries and to receive and disclose any information which is relevant to my 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 accept that failure to supply information required on this form may delay processing of this application;
- I understand and acknowledge my legal obligations under the *Building Act* if registration is granted;

And I make this declaration by virtue of the *Oath, Affidavits and Declarations Act* 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.

Declared at _____ (place where the declaration is made) on the _____ day of _____ 20__.

Signature (person making the declaration)

Signature of Witness

Full Name and Address of Witness

Note: it is an offence under the *Oaths, Affidavits and Declarations Act* for a person to intentionally do something to a Statutory Declaration that results in it becoming false or misleading whether the thing done is done intentionally or recklessly. If convicted of this offence you may be fined or imprisoned. It is an offence under the *Criminal Code Act* for a person to make a statutory declaration that is, to the knowledge of the person making the statutory declaration, false. If convicted of this offence you may be imprisoned.

This declaration may be made before any person who has attained the age of 18 years.

PAYMENT DETAILS			
Contact your local Territory Business Centre for the relevant schedule of fees.			
Cash - Territory Business Centre			
Cheque - payable to RTM (Receiver of Territory monies)			
Credit card	Visa MasterCard		
Credit card number			
Expiry			
Name on card			
I hereby authorise the Territory Business Centre to debit the above credit card for the amount of		\$	
Amount in words			dollars
Signature of cardholder		Date	
Contact phone number			

LODGEMENT DETAILS	
Applications can be lodged at a Territory Business Centre with the prescribed fee at:	
<p>Darwin Darwin Corporate Park Ground Floor, Building 3 631 Stuart Highy Way BERRIMAH NT 0828 Darwin GPO Box 9800 Darwin NT 0801 t: (08) 8982 1700 f: (08) 8982 1725 Toll free: 1800 193 111 e: territory.businesscentre@nt.gov.au</p>	<p>Katherine Shop 1, Randazzo Building 18 Katherine Terrace Katherine PO Box 9800 Katherine NT 0851 t: (08) 8973 8180 f: (08) 8973 8188 e: territory.businesscentre@nt.gov.au</p>
<p>Tennant Creek Shop 2, Barkly House Cnr Davidson and Paterson Streets Tennant Creek PO Box 9800 Tennant Creek NT 0861 t: (08) 8962 4411 f: (08) 8982 1725 e: territory.businesscentre@nt.gov.au</p>	<p>Alice Springs Ground Floor, The Green Well Building 50 Bath Street Alice Springs PO Box 9800 Alice Springs NT 0871 t: (08) 8951 8524 f: (08) 8951 8533 e: territory.businesscentre@nt.gov.au</p>

SUBMITTING

CHECKLIST - Please ensure that you have provided the following: **Completed Form**

Application form completed, signed and witnessed where applicable.

 Project List

A detailed project list outlining the work you have completed over the past two years anywhere in Australia.

If you have not completed any projects then you must provide a letter to the Board explaining why you have not completed any projects.

 Copy of current Advanced Tradesman Licence (Certifying Plumber & Drainer)

A copy of your current Advanced Tradesman Licence must be provided with this application.

 Copy of Insurance Certificate (Not Applicable to Building Contractors or Certifying Plumbers)

The insurance certificate of currency must be submitted with your application. The policy must note you as an insured party or if you are using your employer's insurance it must be accompanied by a letter from the employer on company letterhead (and signed by a company director) confirming that you are covered by their insurance policy.

 Net Assets Certificate from Accountant (Building Contractor Residential ONLY)

You must provide an ORIGINAL Net Assets Certificate, as certified by a registered accountant that you have "Net Tangible Assets" of \$50,000 or more, as required by the Building Regulations. You must maintain at least that minimum amount during the entire period of registration.

 All Relevant Documentation Required by Section 5 Fit and Proper

If you ticked YES to any questions you must provide full details of all relevant documentation on a separate sheet of paper in the form of a statutory declaration clearly outlining the date, reasons and outcomes.

 All Relevant Documentation Required by Section 6 Past Performance

If you ticked YES to any questions you must provide full details of all relevant documentation on a separate sheet of paper in the form of a statutory declaration clearly outlining the date, reasons and outcomes.

 Identification

For identification purposes at least one copy of your birth certificate, passport, drivers licence or Medicare card or other acceptable documentation must be attached to this application. A copy of the Board's identification policy is available online at <http://www.bpb.nt.gov.au>

 Photograph (optional)

Passport photograph to be included in the application if you wish to be issued a registration card.

 Application Fee

Complete credit card details on page 6 of the application or enclose cheque made out to RTM.