

**NORTHERN TERRITORY OF AUSTRALIA  
BUILDING PRACTITIONERS BOARD**

**APPOINTMENT OF NOMINEE BY CORPORATION**

**SECTION 1 BUSINESS DETAILS**

CORPORATION  
NAME

TRADING NAME

ACN

ABN

**SECTION 2 CONTACT DETAILS**

BUSINESS  
NUMBER

FAX NUMBER

EMAIL  
ADDRESS

WEB SITE

**SECTION 3 ADDRESS DETAILS**

BUSINESS  
ADDRESS

POSTAL  
ADDRESS

**SECTION 4 CURRENT REGISTRATION DETAILS OF CORPORATION**Corporation's Registration  
Number

Specify subcategory -

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

**SECTION 5 LIST OF NOMINEES**

List details of any registered practitioners to be appointed as a nominee for the corporation as required by section 22A of the Building Act.

PRACTITIONER NAME	REGISTRATION NUMBER

**Acceptance**

**Each person listed above must sign his or her acceptance below. If insufficient acceptances are provided for photocopy this page and attach to the application.**

I \_\_\_\_\_ hereby accept nomination as the registered practitioner for the corporation described in this application. I understand the responsibilities imposed upon me by the *Building Act* during the period I am the registered practitioner. I understand I am responsible for all work undertaken by the corporation. I undertake to notify the Building Practitioners Board in writing if I cease to act as the registered practitioner for this corporation.

Signature

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 *Building Act* during the period I am the registered practitioner. I understand I am responsible for all work undertaken by the corporation. I undertake to notify the Building Practitioners Board in writing if I cease to act as the registered practitioner for this corporation.

Signature \_\_\_\_\_

Date / /

**Note: The appointment takes effect when the relevant details are entered in the Building Practitioners Board register.**

#### **PRIVACY**

The Building Practitioners Board of the Northern Territory (NT) is collecting the information on this form 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 for the public to access 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](http://www.nt.gov.au/ntg/disclaimer.shtml) and adheres to the privacy legislation contained within the *Information Act* (NT). Personal information provided on this form can be accessed by you. For more information, please contact the Building Practitioners Board, or the Audit and Information Officer for the Department, on 8924 7434.

#### **SUBMITTING**

The completed form should be addressed to The Registrar, Building Practitioners Board AND

**POSTED TO** OR **LODGED IN PERSON** Monday to Friday 8:00AM to 4:00PM

The Registrar  
Building Practitioners Board  
GPO Box 1680  
DARWIN NT 0801

Ground Floor, Arnhemica House  
16 Parap Road  
PARAP  
Phone 8936 4082

First Floor, Alice Springs Plaza  
36 Todd St (Cnr Todd Mall & Parsons St)  
ALICE SPRINGS  
Phone 8951 9218

First Floor, Government Centre  
5 First St  
KATHERINE  
Phone 8973 8926

33 Leichhardt St  
TENNANT CREEK  
Phone 8951 9218 (Alice Springs)