

NORTHERN TERRITORY BUILDING PRACTITIONERS BOARD

**APPLICATION FOR REGISTRATION AS A
BUILDING PRACTITIONER
BUILDING CONTRACTOR
CORPORATION**

SECTION 1 BUSINESS DETAILS

**CORPORATION
NAME**

**FIRM or TRADING
NAME**

ACN

ABN

SECTION 2 CONTACT DETAILS

**BUSINESS PHONE
NUMBER**

FAX NUMBER

**EMAIL
ADDRESS**

WEB SITE

SECTION 3 ADDRESS DETAILS

**BUSINESS
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.

SECTION 4 SUB-CATEGORY OF PRACTITIONER

Indicate sub-category being sought:-

BUILDING CONTRACTOR RESIDENTIAL RESTRICTED
(Flats or units limited to a maximum of 3 storeys)
OR

BUILDING CONTRACTOR RESIDENTIAL UNRESTRICTED

SECTION 5 DIRECTORS DETAILS

List the names of ALL directors of the corporation.

NAME	DATE OF BIRTH	ADDRESS

SECTION 6 OTHER INFORMATION

In order to assist the Building Practitioners Board in determining whether ALL directors of the corporation are fit and proper persons to be registered if the application had been made by them personally pursuant to Section 24B(2)(a) of the *Building Act*, tick yes or no in the relevant box for the following questions.

Have ANY of the directors of the corporation:

- | | YES | NO |
|--|--------------------------|--------------------------|
| 1. Been declared bankrupt or entered into an arrangement with creditors in the last 5 years? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Been convicted of a criminal offence (other than minor traffic offence) in the last 5 years or are any court proceedings pending? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Ever been disqualified from holding an occupational licence or certificate, or had an occupational licence or certificate cancelled or suspended (including interstate licence, certificates or registration)? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Ever been fined, reprimanded or cautioned for any breach of rules, professional conduct or code of ethics in respect of any work they have done in an equivalent position? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Been a Director, Secretary or a person in a position to control or substantially influence a company's conduct or affairs 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"/> |

If ANY of the directors have ticked YES to any of these questions you MUST provide details and copies of relevant documentation.

SECTION 7 LIST OF BUILDING PRACTITIONERS

List details of the registered practitioners (director or nominees, resident in the Territory) required pursuant to section 24B(2)(b)&(c) of the *Building Act*.

PRACTITIONER NAME	REGISTRATION NUMBER	Is the Individual a director of the company? Answer YES or NO

Director/Nominee Acceptance

Each person listed above must sign their acceptance below. If insufficient acceptance are provided 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 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 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 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 undertake to notify the Building Practitioners Board in writing if I cease to act as the registered practitioner for this corporation.

Signature _____ Date / /

SECTION 8 COMPANY REGISTRATION

A copy of the Certificate of Incorporation with the Australian Securities Commission and a company extract (less than 28 days old) must accompany this application.

SECTION 9 FINANCIAL REQUIREMENTS

The corporation must have Net Tangible Assets of \$50,000. Evidence certified by a registered accountant that you meet this required is to be lodged with this application.

Refer attached information sheet for details of how Net Tangible assets is determined and a sample accountant statement.

PLEASE NOTE the original of the accountant's statement is required. Facsimiles or photocopies will not be accepted.

SECTION 10 PAYMENT OF FEES

An application fee of \$200 is applicable. This fee is non-refundable but is credited to the 2 year registration fee of \$800 – i.e. a further \$600 is payable if successful. The fee is payable either by cheque made payable to the "Receiver of Territory Monies" (RTM), by credit card or cash (lodged in person only – DO NOT SEND CASH VIA MAIL).

Payment Details

A cheque for \$_____ is enclosed

OR

Please debit my VISA MasterCard For \$_____

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Credit Card Number				Expiry Date		

Card holder name _____

Card holder signature _____ Date ___/___/___

FOR OFFICE USE ONLY			
Receipt Number	<input type="text"/>	Date	<input type="text"/>
Amount	<input type="text"/>	Received By	<input type="text"/>

SECTION 11 DECLARATION

This declaration must be made by 2 directors or director and secretary of a corporation (or by the sole director/secretary if applicable).

Oaths Act (NT).

I/We, _____
(insert full names)

being directors/(director and secretary)/(sole director/secretary) (delete as applicable) of the corporation

(insert corporation 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/We give the Northern Territory Building Practitioners Board consent to make any enquiries and to receive and disclose any information which is relevant to the our initial and ongoing eligibility to be registered as a building practitioner;
- I/We acknowledge that information (company name, postal address, telephone number, registration category, registration number, registration status, registration expiry date, registration conditions/endorsements and the name of any nominees) will be placed on a register 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/our legal obligations under the *Building Act* if registration is granted;

And I/We make this solemn declaration by virtue of the *Oaths Act* and conscientiously believing the statements contained in this declaration to be true in every particular.

Declared at _____ this _____ day of _____ 20____.

Signature

Signature

Signature of Witness

Signature of Witness

Name and Address of Witness

Name and Address of Witness

Note A person wilfully making a false statement in a statutory declaration is liable to a penalty of \$2,000 or imprisonment of 12 months, or both.

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

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 registration as a building practitioner – building contractor, 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 Department of Planning & Infrastructure's privacy statement available at <http://www.nt.gov.au/dpi/copyright/pdf/privacystatement.pdf> 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 Registrar, Building Practitioners Board on (08) 8923 9309.

SUBMITTING

CHECKLIST - Please ensure that you have provided the following:

- Completed Form
- Certification of Incorporation
- Company extract
- Certification of Net Tangible Assets by a Registered Accountant (original required)
- All Relevant Documentation Required by Section 6
- Application Fee of \$200

The completed form, attachments and fee should

POSTED TO
The Registrar
Building Practitioners Board
GPO Box 1680
DARWIN NT 0801

OR

LODGED IN PERSON (Monday- Friday 8.00am -4.00pm)
NT Build
12 Charlton Court
WOOLNER
Phone (08) 8923 9309

First Floor, Alice Springs Plaza
36 Todd St (Cnr Todd Mall & Parsons St)
ALICE SPRINGS
Phone (08) 8951 9235

First Floor, Government Centre
5 First St
KATHERINE
Phone (08) 8973 8926

33 Leichhardt St
TENNANT CREEK
Phone (08) 8951 9235 (Alice Springs)