

NORTHERN TERRITORY ARCHITECTS BOARD
ABN 76 154 582 645
Application for Registration as an Architect

This information sheet is to assist you in applying for Registration as a Natural Person.

NOTE: If you are registered in a jurisdiction in Australia please use the form "Application for registration as an Architect under *Mutual Recognition Act* "

SUPPORTING DOCUMENTS

1. Complete the Application Form and attach a signed photograph of yourself to the top right hand corner of the form.
2. Have your qualifications and your Certificate from AACA photocopied and certified as a true copy by a Commissioner of Oaths or Declarations, a Justice of the Peace, or a solicitor.

COST

3. The cost of the application is \$50.00*, and if your application is approved, a further \$30.00* will be charged for the production of your Certificate and \$50.00* for the first year's annual registration fee.
(*GST Exempt)
4. Please make cheques payable to the Receiver of Territory Monies (RTM)

FORWARDING YOUR APPLICATION

5. Forward the application form, together with documents mentioned in dot point (2) above and a cheque for \$50.00 to: -

Registrar
NT Architects Board
GPO Box 1680
DARWIN NT 0801

Or deliver to:

NT Architects Board
Ground Floor, Cavenagh House
38 Cavenagh Street
DARWIN NT 0800

ANNUAL REGISTRATION FEES

6. The Annual Registration fee is \$50.00, and is payable by the 1 February each year. Penalty for non-payment is deregistration.

CHANGE OF ADDRESS

7. Under s.18 of the *Architects Act*, you are required to notify the Board of any change of address within 7 days of that change. Penalty for non-notification is \$500.00.

NORTHERN TERRITORY ARCHITECTS BOARD

APPLICATION FOR REGISTRATION AS A NATURAL PERSON

PLACE PASSPORT
PHOTOGRAPH HERE

Do not staple or pin.
Paperclip preferred.

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SURNAME		
GIVEN NAMES		
DATE OF BIRTH		
RESIDENTIAL ADDRESS		
POSTAL ADDRESS (ADDRESS FOR SERVICE OF NOTICES)		
TELEPHONE NUMBER/ FACSIMILE NUMBER	Tel:	Fax:
EMAIL ADDRESS		
EMPLOYER		
EMPLOYER'S POSTAL ADDRESS IF SELF EMPLOYED, PROFESSIONAL POSTAL ADDRESS		
<u>QUALIFICATIONS</u>		
A. YEAR OF GRADUATION	A.	
B. UNIVERSITY/INSTITUTION ATTENDED	B.	
ARE YOU REGISTERED ANYWHERE ELSE IN AUSTRALIA	*YES	*NO
A. WHERE?	A.	
B. IS YOUR REGISTRATION CURRENT?	*YES	*NO
C. WHAT IS YOUR REGISTRATION NO.	C.	
HAVE YOU EVER HAD YOUR DIPLOMA, DEGREE OR YOUR REGISTRATION AS AN ARCHITECT WITHDRAWN OR CANCELLED? IF YES GIVE DETAILS	*YES	*NO
	Details:	
HAVE YOU BEEN CONVICTED, UNDER ANY LAW, OF ANY INDICTABLE OFFENCE? IF SO GIVE DETAILS	*YES	*NO
	Details:	

