



# Reissue Building surveying practitioner Level 1 & level 2

Form 45

## Use of this form

This form is to be used by building surveyors who were recently registered as practitioners with the Building Services Board, whose registrations have expired and the building surveyors want their registrations reinstated.

## Board consent to late application

If you have requested the Board's consent to a late application for renewal and the Board has given that consent in writing, make your application on Form 59 instead of this form. Contact the Department for Form 59.

## Registration as a building surveying practitioner

In Western Australia a building surveyor who wishes to act as a nominated supervisor for a registered building surveying contractor or wishes to use a prescribed title such as *registered building surveying practitioner* must be registered as a building surveying practitioner.

Registration as a building surveying practitioner does not authorise a building surveyor to provide services as a contractor.

## Registration as a building surveying contractor

A person, partnership or company must be registered as a building surveying contractor to:

- contract with others to provide building surveying services;
- issue compliance certificates; or
- use a prescribed title such as *registered building surveying contractor*.

## Period of registration

If the Board approves your application, registration will be granted for a period of three years.

## Registration and application fees

Two fees are payable with this application, a non-refundable application fee and a registration fee.

The registration fee for three years.

GST is not payable on the application or registration fee.

If the Board does not grant your registration, the registration fee will be refunded.

## Complete your application

Your application cannot be processed unless all sections are completed, all attachments provided and fees paid.

## Incomplete applications

The Department cannot process incomplete applications.

If your application is incomplete or is not fully informative, you will be requested to provide outstanding or additional information. If you do not provide the information by the date stated in the request your application will be returned. The application fee will not be refunded.

## After your application is lodged

The Department will confirm receipt of your application. If you do not receive an acknowledgement within 15 business days, please contact the department on 1300 489 099.

When the Department is satisfied that your application is complete and payment is received it will refer your application to the Board for a decision on registration.

## Return of documents

The Department does not normally return documents lodged in registration applications. If you need a copy of the application or attached documents, please make a copy before you lodge your application.

**Lodge and pay**

Pay for and lodge your application including attachments:

 **By post**

Pay by credit card using the payment slip on the form or pay by cheque or money order made payable to –

Department of Mines, Industry  
Regulation and Safety

Licensing Services Branch  
Locked Bag 100  
EAST PERTH WA 6892

 **In person**


Lodge your application and pay by cash, cheque, money order or card at the customer service counter.


Level 1, 303 Sevenoaks Street  
CANNINGTON WA 6107

Office hours are:  
Mon–Fri 8:30am to 4:30pm.

 **In person (drop off only service)**

Department of Mines, Industry  
Regulation and Safety  
Level 2, Gordon Stephenson House  
140 William Street, PERTH

 BPAY and online payment are not available for this registration.

 The department will not receive email or fax applications for this registration.

**Certified copies**

If you are providing a copy of any document with your application instead of an original it must be a certified copy. To have a copy certified you must show the copy of a document, together with the original to a person who is an authorised witness. The witness must:

- certify the copy is a true copy of the original;
- place their signature, together with their full name and their qualification to be a witness, immediately adjacent to the words of certification.

Professionals in the following occupations, who must not be related to the applicant, are authorised to certify documents:

- Accountant
- Bank Manager
- Chemist
- Dentist
- Doctor
- Justice of the Peace
- Lawyer
- Local Government Councillor
- Minister of Religion
- Police Officer
- Post Office Manager
- Public Servant
- Real Estate Agent

A complete list is available in Schedule 2 of the *Oaths, Affidavits and Statutory Declarations Act 2005*.

**More information**

If you need more information about the status of your application or about practitioner registration generally, contact Licensing Services on 1300 489 099 or email [be.licensing@dmirs.wa.gov.au](mailto:be.licensing@dmirs.wa.gov.au).



**Reissue**

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45**

## Building Surveying Practitioner Level 1 & Level 2

An incomplete or inaccurate application will not be accepted. If you need help completing this form please contact Licensing Services on 1300 489 099.

### CHECKLIST

Use this checklist reminder to ensure that you complete all parts of your application and attach all necessary supporting documents.

- Form complete and details correct
- Proof of identity – 100 points
- Questions 1 to 11 answered
- Australian police check – less than three months old, attached
- Form signed and dated
- Payment made – application fee & registration fee

### PAYMENT

#### CREDIT CARD PAYMENT DETAILS

(Payment will appear as "WA Gov – DMIRS" on your bank statement)

Card Type    Visa  Mastercard     (Only Visa and Mastercard accepted)

Card Number

Card Holder  Please print

Expiry Date   /   *I authorise the Department to deduct the current prescribed fee\**

Signature / Authorisation     Date

Cardholder's contact phone number:

\*Fees are subject to change on 1 July of each year

ABN: 69 410 335 356

#### Office Use only

Registration No:	Department Code	BC	Chart Description	
				<input type="checkbox"/> BSurv App Fee Prac Ind Initial – Lvl 1&2 <input type="checkbox"/> BSurv Reg Fee Prac Ind Initial – Lvl 1&2
<b>Total Fee</b>	\$	<b>Link Licence</b>	Yes	



# Reissue

# Form 45

**Your application cannot be assessed unless all sections are completed and all attachments are provided.**

### Personal details

Salutation	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other please specify			
Family name				
First name				
Other name(s)		Date of birth		
Have you been known by any other names?	<input type="checkbox"/> No <input type="checkbox"/> Yes			



If you answered 'yes' above, attach a separate page with full details.     Attached

**Principal place of business address** – required for publication in the register. It cannot be a post office box number.

Street			
Suburb	State	Postcode	

**Address for service** – required for the purpose of serving documents. It cannot be a post office box number.     As above.

Street			
Suburb	State	Postcode	

**Postal address** – address for correspondence from the Department.

As above.

Street or PO Box			
Suburb	State	Postcode	

### Contact details

Phone (home)	(    )	Phone (work)	(    )
Phone (mobile)*			
Email*			

\* **Required** to receive courtesy renewal reminder notifications by SMS and email and other important information relevant to your registration

## PROOF OF IDENTITY



Attach proof of your identity by attaching certified copies of two or more documents making a total of at least 100 points. At least one document must include photo identification.

Points allowed	Document	Points	OFFICE USE
<b>70 points</b>	<input type="checkbox"/> Birth certificate (not an extract) <input type="checkbox"/> Current passport <input type="checkbox"/> Australian citizenship certificate		
<b>40 points</b> - for first document from this category.  <b>25 points</b> - for additional documents from this category.	<input type="checkbox"/> Current Australian issued licence or permit card e.g. Driver's licence  <input type="checkbox"/> Current Australian government issued identification card  <input type="checkbox"/> Australian tertiary student identification		
<b>35 points</b> A document from this set must show your name and current residential address.	<input type="checkbox"/> Mortgage document held by an Australian financial body  <input type="checkbox"/> Australian Land Title Office record  <input type="checkbox"/> Document from the Credit Reference Association of Australia		
<b>25 points</b>	<input type="checkbox"/> Australian public utility bill, rates notice or bank statement  <input type="checkbox"/> Credit or debit card issued by Australian banking or credit institution  <input type="checkbox"/> Medicare card  <input type="checkbox"/> Marriage certificate (for maiden name only) or change of name certificate		
<b>Total points</b>			

## FITNESS AND PROPRIETY

- |    |   |                              |                             |
|----|---|------------------------------|-----------------------------|
| 1  | Have you ever been refused registration as a building surveying practitioner by a registration board or similar body in any Australian state or territory?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2  | Have you ever been refused a registration or occupational licence, other than as a building surveying practitioner, by a registration board or similar body in any Australian state or territory?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3  | Has your registration with any registration board ever been suspended or cancelled, other than for non-payment of registration?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4  | Have you ever been disciplined by any registration board?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5  | Are you currently the subject of disciplinary proceedings by any registration board, including any preliminary investigation or action that might lead to disciplinary proceedings?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6  | Have you ever been the subject of an order made by the State Administrative Tribunal?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7  | Have you been a director or officer of a corporation which has been the subject of disciplinary proceedings for contravention of the <i>Building Act 2011</i> , <i>Building Services (Registration) Act 2011</i> , the <i>Building Services (Complaint Resolution and Administration) Act 2011</i> or the <i>Home Building Contracts Act 1991</i> ? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 8  | Have you ever been disqualified from being a director of a company?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 9  | Have you ever been a director or officer of a company that has been declared an insolvent?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 10 | Have you ever been declared bankrupt?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 11 | Are there any other matters which may be relevant to your suitability for registration about which the Board should be informed?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |



If you answered 'yes' to any of questions 1 to 11 above attach details and, if appropriate, a list of cases. If you prefer you may place these attachments in a sealed envelope marked with your name. A 'yes' response will be considered by the Board on the facts presented and may not affect your application for registration.

Attached  N/A

## AUSTRALIAN POLICE CHECK

You must apply for and attach to this application an Australian police check from the approved list of providers, available here: [www.dmirs.wa.gov.au/licensingpolicechecks](http://www.dmirs.wa.gov.au/licensingpolicechecks). If you are providing a hard copy police check it must be the original or a certified copy. An electronic police check can be verified online and does not need to be certified. For more information about how to obtain a police check, go to: [www.dmirs.wa.gov.au/licensingpolicechecks](http://www.dmirs.wa.gov.au/licensingpolicechecks). The date of issue of the police check must be within three (3) months of the date you lodge this application.



Attach an Australian police check dated within three months of this application date.

Attached

## QUALIFICATIONS AND EXPERIENCE

If you were previously registered by the Building Services Board as a building surveying practitioner L1 or L2, within three years of the date of this application you are not required to provide current evidence of your qualifications and experience. Please confirm that you were previously registered. If possible give your former registration number.

Have you been registered as a building surveying practitioner L1 or L2 by the Building Services Board within the last three years?  Yes  No

If 'yes', if possible provide your former registration number.

\_\_\_\_\_  
Registration number

## NOMINATED SUPERVISOR

Are you intending to be the nominated supervisor for a company or partnership registered as a building surveying contractor? If 'yes', name the contractor below.  Yes  No

\_\_\_\_\_  
Name of registered building surveying contractor (do not use trading name)

\_\_\_\_\_  
Contractor registration number

Provide a list if you are intending to be the nominated supervisor for more than one contractor.

## DECLARATION BY APPLICANT

### False and misleading information

Section 99 of the *Building Services (Registration) Act 2011* provides for penalties of up to \$25,000 where a person makes a false or misleading statement or provides false or misleading information or particulars as part of an application for registration or renewal of registration. By signing this application form, you give consent to the Board and its staff to make enquires and to receive and disclose any information about this application.

### Declaration

I,

\_\_\_\_\_  
Full name of applicant

- 1 authorise the Building Services Board, the Department of Mines, Industry Regulation and Safety or persons acting on behalf of the Board or the Department to make enquiries considered necessary to assess this application. My general consent includes the specific consent to the acquisition of copies of my criminal records. I agree that the Board can use any or all information received pursuant to this authority for the purposes of the assessment or audit of this application.
- 2 sincerely declare that this application is true and correct.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date