



Renewal of registration

Building surveying contractor (partnership)

Form 62

Use of this form

This form is to be used by building surveyors trading in partnership structures who are currently registered as contractors with the Building Services Board and are applying for their registration to be renewed.

If you decide that your partnership no longer requires building surveying contractor registration, please advise the Board.

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 person to provide services as a contractor. This form does not permit renewal of a building surveying practitioner registration.

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*.

Financial probity

If your partnership or one of its partners has experienced an insolvency event, further information regarding this event(s) may be required. In certain circumstances, the Board has the power to declare a person an excluded contractor from registration as a building surveying contractor on either a temporary or permanent basis.

Ineligible person

If a partner of the partnership is currently declared an ineligible person, the partnership's registration cannot be renewed.

Excluded contractor

If the partnership is currently declared an excluded contractor (either temporarily or permanently), the partnership's registration cannot be renewed.

Financial capacity

Building surveying contractors must inform the Board if any partner has been an insolvent in the last five years.

Nominated supervisor

It is an offence under the *Building Services (Registration) Act 2011* for a building surveying contractor to carry out or undertake to carry out building surveying services without a nominated supervisor.

If a building surveying contractor changes a nominated supervisor the contractor is required to give written notice to the Board within seven days of this change.

Building service debt

If the partnership has incurred a building service debt, being an unsatisfied court judgement or adjudication determination that has not been paid, its registration cannot be renewed.

Registration expiry date

You must submit your form and supporting documents no later than the registration expiry date.

You are strongly encouraged to apply for renewal well before your expiry date to avoid your registration expiring.

Duration of registration

The renewal is for a period of three years.

Registration renewal fee

The registration renewal fee is for three years.

GST is not payable on this fee.

If the Board refuses your application the registration fee will be refunded.

Late renewal of registration

If there is a reason you have not submitted your form by the expiry date you can apply for a late renewal. Late renewals can only be accepted within six months from the expiry date. However, the Board must also agree your circumstances are exceptional in order to accept your late renewal.

A fee is payable for late renewal of registration.

If you are not eligible for a late renewal you can re-apply for registration.

Return of documents

The Department does not return documents. If required, make a copy before you submit your form and attachments.

After your form is submitted

If the Department requires further information, you will be contacted.

Applications and payments

Complete and sign your form. Submit it with your supporting documents and payment no later than the expiry date.



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

Pay by cash, cheque, money order, credit or debit card at the customer service counter.

Level 1, 303 Sevenoaks Street
CANNINGTON WA 6107

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



BPAY and online payment are not available for this renewal.

State Administrative Tribunal review of Board decisions

The decision to refuse an application for registration is a reviewable decision in certain circumstances. If you disagree with the Board's decision in relation to this registration application, you may be able to apply to the SAT for a review of the decision.

More information

If you need more information about the status of your renewal, contact the Licensing Renewals team on 1300 489 099 or email be.renewals@dmirs.wa.gov.au



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CHECKLIST

Use this checklist to ensure all parts of the application are completed and all necessary supporting documents are attached.

- ☐ Form complete - all questions answered
- ☐ Contact details provided
- ☐ Questions 1 to 9 answered
- ☐ Professional indemnity insurance details completed
- ☐ Nominated supervisor(s) details provided
- ☐ Declaration signed and dated
- ☐ Payment details provided

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 Reg Fee Cont Pship Renewal
Total Fee	\$	Link Licence	Yes	Late Fee	Yes <input type="checkbox"/> No <input type="checkbox"/>



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Ensure all parts of this application are completed and all necessary supporting documents are attached. You must submit a completed form, supporting documents and payment by the partnership's registration expiry date. Incomplete applications **will not** be processed.

OFFICE
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Partnership details

☐ CONDITION

Registration No.		Expiry date	
Partnership name			
Business name		ABN	

**ABN of registered entity. Not another entity or trust.*

Principal place of business address – required for publication on 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

Partnership contact details – partnership email address required for courtesy renewal reminders and other notifications. Mobile required for important notifications via SMS.

Phone (office)		Phone (mobile)	
Email			

Contact person for enquiries for this form

Name			
Phone (mobile)		Email	

Partners' details – for each partner provide name and date of birth.

First Name	Family name	Date of Birth	OFFICE USE
			<input type="checkbox"/>
			<input type="checkbox"/>



Attach a list if there is insufficient space above.

☐ Attached

☐

MANAGEMENT AND SUPERVISION

The partnership is required to have arrangements in place to ensure building surveying services are managed and supervised in a proficient manner.

- 1 Can you confirm the partnership has sufficient management and supervision arrangements in place? ☐ Confirmed ☐ Not confirmed ☐

INELIGIBLE PERSON

If a partner (who is an individual or a an officer of the company which constitutes the partnership) is currently an ineligible person, the partnership's registration cannot be renewed. The State Administrative Tribunal will have informed a partner if they have been declared an "ineligible person".

- 2 Is any partner (who is either an individual or an officer of the company which constitutes the partnership) currently declared an ineligible person by the State Administrative Tribunal? ☐ Yes ☐ No ☐

EXCLUDED CONTRACTOR

If the partnership is currently an excluded contractor, the partnership's registration cannot be renewed. The Building Services Board will have informed the partnership if it has been declared an "excluded contractor".

- 3 Is the partnership currently declared an excluded contractor by the Building Services Board? ☐ Yes ☐ No ☐

FINANCIAL PROBITY

If the partnership or any of its partners have experienced an insolvency event, you may be required to provide further information about this event(s) in relation to the Board's power to declare a person an excluded contractor. You will be contacted by the Department if further information is required.

- 4 Has any partner (who is either an individual or an officer of the company which constitutes the partnership) experienced an insolvency event* in the last five years? ☐ Yes ☐ No ☐

**An insolvency event for an individual (officer) includes bankruptcy, Part IX (Debt Agreements), Part X (Personal Insolvency Agreement) or cancellation by the State Administrative Tribunal on financial grounds.*

If you answered 'yes' above, identify the partner/officer's name and current status:

☐ Still bankrupt

☐ Discharged

Date discharged: / /

- 5 If a company constitutes the partnership, has the company experienced an ☐ Yes ☐ No ☐
- insolvency event[^] in the last five years?

[^]An insolvency event for a company includes appointment of an administrator, a Deed of Company Arrangement or appointment of a receiver or cancellation by the State Administrative Tribunal on financial grounds.

If you answered 'yes' to above, identify the external administrator's current status:

☐ Still appointed ☐ Retired Date retired: / /

- 6 If a company constitutes the partnership, has any officer of the company ☐ Yes ☐ No ☐
- been a director or company secretary of a company(s) within two years of that company(s) experiencing an insolvency event[^] in the last five years?

If you answered "Yes" above, provide the following details:

Company name	ACN	Full name of officer	
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>



Attach a list if there is insufficient space above.

☐ Attached ☐

FINANCIAL CAPACITY

The partnership and its partners must not be an insolvent. If the partnership or any of its partners have previously been insolvent, the partnership must have the capacity to meet debts as and when they fall due.

- 7 Do the partners have the capacity to meet their debts as and when they ☐ Yes ☐ No ☐
- fall due?

BUILDING SERVICE DEBT

If the partnership has a building service debt that has not been paid in full within the specified period (or is not subject to a payment arrangement, or proceedings have not commenced for an appeal or review), its registration cannot be renewed.

- 8 Does the partnership have any outstanding debts for which judgement has ☐ Yes ☐ No ☐
- been entered in a court of competent jurisdiction (e.g. Magistrates, District, Federal Court) in connection with a contract for a building service or for the supply of goods or services for a building service?

- 9 Does the have any outstanding adjudicated amounts that are payable ☐ Yes ☐ No ☐
- under the *Building and Construction Industry (Security of Payment) Act 2021* or the *Construction Contracts (Former Provisions) Act 2004*?

NOMINATED SUPERVISOR

The partnership is required to have at least one nominated supervisor who is a registered practitioner. List all the partnership's nominated supervisor(s) below.

First name	Family name	Registration No.	Current nominated supervisor?	OFFICE USE
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>



Attach a list if the partnership has more than three nominated supervisors.

☐ Attached

**PROFESSIONAL INDEMNITY INSURANCE**

The partnership is required to have professional indemnity insurance with a minimum level of indemnity of \$1,000,000 in any one claim and \$2,000,000 in aggregate in any one period of insurance.

State your insurance cover below:

Insurer				<input type="checkbox"/>
Policy number		Expiry date		<input type="checkbox"/>
Cover for any one claim	\$			<input type="checkbox"/>
Aggregate of cover in any one period of	\$			<input type="checkbox"/>

It is expected that the partnership will renew and maintain its insurance cover for the period of its registration.

The *Building Services (Registration) Act 2011* requires you to give the Building Services Board written notice of any change in circumstances that affects the partnership's eligibility to remain registered.

A change in the partnership's insurance arrangements could constitute such a change in circumstances. The notice must be given within seven days after the change in circumstances. The penalty for the offence of not notifying the Board is a fine of \$10,000.

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.

Information for document execution

This document is to be executed on behalf of the partnership by a person authorised by the partnership.

Declaration

I/we hereby 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 the criminal records and credit reports of the partnership and its partners. 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.

Executed for and on behalf of:

Applicant's name (name of registered entity)

OFFICE
USE



Signature of applicant partner/director of partner (if applicable)
For and on behalf of the partnership
Delete if not applicable

Signature of partner/director of partner (if applicable) or
Signature of company secretary (being sole
director/secretary of the company, if applicable)
For and on behalf of the partnership
Delete if not applicable



Name (print)

Name (print)



Date

Date