

Architects (Application for Registration as an Architect in the ACT) Approval 2004

Approval statement for

Approved Form AF2004-10

made under the

Architects Act 2004, section 92 (Approved Forms)

1 Name of instrument

This instrument is the Architects (Application for Registration as an Architect in the ACT) Approval 2004.

2 Commencement

This instrument commences on the day after notification.

3 Approval

The attached form is approved for the purpose of applying for registration as an architect in the Australian Capital Territory.

Cynthia Breheny
Chair
ACT Architects Board
24 June 2004

Application for Registration as an Architect in the ACT



building our city
building our community
ACT Government

Privacy Information

The information you are asked to provide will be used to assess your ability to hold registration as an Architect in the ACT.

The lawful authority for the collection of this information is the *Architects Act 2004*. The information may be disclosed to other Architect Registration Authorities.

Note

For applicants applying for registration that are not registered in another State or Territory complete points 1, 2, 4 & 5.

For applicants applying for registration under Mutual Recognition (registered in another State or Territory) complete points 1, 3, 4 & 5.

For applicants re-applying for registration complete points 1, 4 & 5 and list your previous ACT registration number below your signature.

Office Use Only

Received

Approved

Registration no.

1. Applicant Details

Surname _____ Date of Birth _____
 Given Names _____
 Residential Address _____
 _____ Territory/State _____ Postcode _____
 Postal Address _____
 _____ Territory/State _____ Postcode _____
 Business Address _____
 _____ Territory/State _____ Postcode _____
 Home Phone _____ Business Phone _____
 Mobile Phone _____ Email _____

2. Documentary evidence

Please attach **certified copies** of:

- Qualifications Photo Identification 1 x Professional Reference
 AACA APE Certificate 1 x Personal Reference 1 x Passport sized Photo

3. Registration under Mutual Recognition - Documentary evidence

Please attach **certified copies** of:

- Interstate Registration/s Photo Identification

4. Questionnaire

Have you been bankrupt, or are applying to take the benefit of any law for the relief of bankrupt or insolvent debtors, or compounding with creditors or making an assignment of remuneration for the benefit of creditors? No Yes

Have you been convicted or found guilty of an offence against the Architects Act 2004 or the Repealed Architects Act 1959? No Yes

Have you been convicted or found guilty of an offence against a Commonwealth, Territory or State law punishable by imprisonment for 1 year or longer? No Yes

Have you ever had Architects registration disqualified, cancelled or suspended under the corresponding laws of any other State or Territory? No Yes

If you have answered yes to any of the above questions please provide details:

5. Declaration

I declare that all the information contained and attached to this application is complete, accurate and true to the best of my knowledge. I understand that there are severe penalties for providing false or misleading information.

Signature _____ Date _____

Previous ACT Registration No. (if applicable) _____

Please attach your passport-sized photo here if required to complete part 2.



Payments

NOTE: Application fee - \$215.00 A4 certificate - \$11.40 (GST does not apply)

Please indicate if you wish to pay for and receive the A4 certificate

Cheques should be made payable to the "receiver of public monies"

Please provide your name and address on the back of the cheque.

Payment options

IN PERSON – present your cash, cheque, money order or credit/debit card (\$5.00 minimum payment and \$2500.00 maximum payment for credit card) at the ACT Building, Electrical and Plumbing Control office, ground floor, north, Dame Pattie Menzies House, 16 Challis Street, Dickson, ACT (8:30 am to 4:30 pm Monday to Friday except public holidays).

BY FAX – complete the credit card details and payment details (\$5.00 minimum payment and \$2500.00 maximum payment for credit card) then fax it to ACT Building, Electrical and Plumbing Control on fax number (02) 6207 6324 (Bankcard, Mastercard and VISA accepted).

BY MAIL – enclose a cheque or money order or complete the credit card details and payment details (\$5.00 minimum payment and \$2500.00 maximum payment for credit card) then post it to Licensing Unit, ACT Building, Electrical and Plumbing Control, GPO Box 1908, Canberra ACT 2601.

ACT ARCHITECT BOARD ENQUIRIES – Please call (02) 6207 6288, facsimile (02) 6207 6324

Payment authority – for fax or mail payments only (see above)

Please charge the amount of \$ _____ to the: Bankcard Mastercard Visa of:

Name of cardholder _____

Card Number _____ Expiry date _____

Cardholder's
Signature _____ Date _____