

### COMPLETING THIS FORM

- Use BLACK pen only
- Print clearly in BLOCK LETTERS
- DO NOT use correction fluid any amendments should be crossed out and initialled

Please complete all details of this application where applicable. All items marked with an \*asterisk must be completed before submitting. The claimant must ensure all details are correct.

This form is to be used to request an adjudication certificate under section 30 of the *Building and Construction Industry Payments Act 2004* (Qld) (BCIPA):

- if the respondent has failed to pay the whole of the adjudicated amount; and,
- 5 (five) business days have passed since the adjudication decision was served on the respondent; or the due date for payment stated in the decision has passed; whichever occurs later.

## **1. ADJUDICATION DECISION DETAILS**

*Adjudication decison number	* Adjudicated amount as stated in decision	\$
*Payment claim amount (excl GST) as stated in decision	\$ Interest to be stated on certificate for overdue amount as calculated by the claimant	

## 2. CLAIMANT DETAILS

To assist pro	ocessing you must provide a Claimant name as stated in the adjudication decision
*Name company/	
individual	
*Postal address	
	State Postcode
*Physical address:	
(For inclusion in affidavit)	State Postcode
Business ph [	
Mobile ph [	Fax
*Email [	
*Contact person	

#### PRIVACY NOTICE:

The functions of the registrar of the adjudication registry include the collection of statistical data and other information relevant to the administration of the registry. Information you provide in this form may be collected for that purpose.

Information about the QBCC's Privacy Policy is available on our website.

	Date lodged	Time lodged	Office	location	
OFFICE ONLY	Received by		Total pages/folders/boxes	Fee amount	
	Receipt no.	Application emailed	d to Registry	Date & time	

# **3. CERTIFICATE DELIVERY DETAILS**

*Preference for delivery	Posta	ıl add	ress	Collec	t fron	n QBC	C Bri	sbane	è 🗌	Emai	l and	Post	 Agent	posta	al, cor	nplete	e agei	nt det	ails be	elow
Name of Agent acting for claimant																				
(if applicable)																				
Address																				
										s	tate			F	Postc	ode				
Business ph																				
Mobile ph											Fax									
Email																				
Contact person																				

## 4. FEES

Payment claim amount (excl GST)	Certificate fee
0-\$25,000	\$57.35
more than \$25,000	\$114.70

### I will be paying:

by credit card (QBCC cannot accept American Express or Diners Club)

Credit card number			]									
Expiry date		/			ISA		Ma	sterc	ard			
Amount paid	\$			].								
Cardholder's name												
Cardholder's signature			 		 	 	 					

# 5. DECLARATION

Ι,

hereby apply for an

adjudication certificate under section 30 of the *Building and Construction Industry Payments Act 2004* (BCIPA). I declare that:

- I am the claimant, or the legal representative of the claimant, to whom this application relates;
- the adjudicator's decision has been served on the respondent;
- the respondent has failed to pay the whole or part of the adjudicated amount within the time permitted by section 29 of the *Building and Construction Industry Payments Act 2004* (Qld).

			/		/		
APPLICANT'S SIGNATURE		Ξ					

#### Deliver this form to Adjudication Registrar:

In Person - QBCC, 299 Montague Road, West End Qld 4101 Post - GPO Box 5099 Brisbane Qld 4001