

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

1. PERSONAL DETAILS

Surname:

First names:

Date of birth: – – ABN:

Postal address:

Postcode:

Business address:

(This cannot be a PO Box) Postcode:

Home address:

Postcode:

Business ph: Home ph:

Mobile ph: Fax:

Email:

2. CHANGE OF LICENCE DETAILS

I am applying to change my level of licence and or endorsement YES NO

If yes, please indicate new level/endorsement in table below (a fee of \$144.85 applies):

Level	with Private Certifier endorsement *	endorsement to issue Development Approvals
Building certifier level 1	<input type="checkbox"/>	<input type="checkbox"/>
Building certifier level 2	<input type="checkbox"/>	<input type="checkbox"/>
Building certifier level 3	<input type="checkbox"/>	<input type="checkbox"/>

**If adding this endorsement to your licence and changing your Professional Indemnity (PI) which applies:*

I am employed with and I am covered by their PI insurance

I am covered by PI insurance in my own name

The QBCC is collecting information on this form to ensure your information on our systems and on the certifier register in relation to a particular certifier is correct. This is authorised by the *Building Act 1975*.

You may receive some related information from us for the purposes of marketing and communications. You will be able to opt-out/ unsubscribe to receiving this information. Please refer to our [Privacy Policy](#) for full use and disclosure details.

All information held by the QBCC may be subject to application for access under the *Right to Information Act 2009* (RTI Act).

OFFICE ONLY	CRN:	<input type="text"/>	Licence No:	<input type="text"/>
	Application ID:	<input type="text"/>	Data entry:	<input type="text"/>

3. CHANGE OF PI INSURANCE

I am applying to change PI insurance

YES NO

If yes, please tick one of the following (no fee applies):

I am employed by
and I am covered by their PI Insurance
I am covered by PI Insurance in my own name

4. EVIDENCE

Only complete this section if you are changing your licence level

I have attached the following documentary evidence to this application - please tick (all copies must be certified)

	YES	NO
Current Certificate of Accreditation for a particular level of licence from an accreditation standards body.	<input type="checkbox"/>	<input type="checkbox"/>
Certificate of PI Insurance in the name of the employer.	<input type="checkbox"/>	<input type="checkbox"/>
QBCC 'Professional Indemnity Declaration' and 'Schedule A', where PI insurance is in the name of the employer	<input type="checkbox"/>	<input type="checkbox"/>
Certificate of Professional Indemnity Insurance in my own name	<input type="checkbox"/>	<input type="checkbox"/>
Current Certificate of Attainment for issuing development permits	<input type="checkbox"/>	<input type="checkbox"/>
For building certifier level 3, employment references evidencing at least 1 years experience as a building certifier level 3	<input type="checkbox"/>	<input type="checkbox"/>

5. DECLARATION

APPLICANT'S DECLARATION

I declare that the information provided by me in this form is true and correct to the best of my knowledge.

Applicant's signature

Date / /

Please ensure that this declaration is not dated more than one (1) month prior to the date the application is submitted to the QBCC.

6. FEES

I will be paying \$144.85

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

Credit card number

Expiry date / VISA Mastercard

Amount paid \$.

Cardholder's name

Cardholder's signature

Please forward it to:

Manager, Building Certification, Queensland Building and Construction Commission, GPO Box 5099, Brisbane Qld 4001 Telephone: 139 333