



BPB

Building Professionals Board

Environmental Planning and Assessment Act 1979

Notice of proposed replacement of the principal certifying authority

If the current principal certifying authority (PCA) for the development, the person who appointed the current PCA and the person who is proposed to be appointed to replace the current PCA all agree, the appointment to replace the PCA may be made *after* notice is given to the Building Professionals Board, the council and the consent authority. You can use this form to provide that notice.

If you do not have the agreement of one of these persons, you cannot use this form (you need to complete an *Application to replace the principal certifying authority*).

You need to submit all the information required by this form.

1. DETAILS OF THE PERSON GIVING THE NOTICE

Name

Title		Given names	
Surname			

Business address/details

Business name					
Unit/Street no.		Street			
Suburb			State		Postcode

Postal address

Unit/Street no.		Street			
Suburb			State		Postcode

Address for correspondence (select one)

Residential	<input type="checkbox"/>	Business	<input type="checkbox"/>	PO Box	<input type="checkbox"/>
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Contact details

Res. tel.	()	Bus. tel.	()
Mobile		Fax	()
Email			

2. DETAILS OF THE DEVELOPMENT

Development address

Unit/Street no.		Street					
Suburb				State		Postcode	

Council area: _____

Briefly describe the development: _____

Development consent:

Development consent/complying development certificate (CDC) no. _____

Date of issue: / /

Who issued the consent or CDC? _____

Construction certificate:

Construction certificate no. _____

Date of issue: / /

Who issued the construction certificate? _____

3. DETAILS OF THE PERSON WHO APPOINTED THE CURRENT PCA

If this person is the same as the person giving this notice, you do not need to complete this section or section 4.

Name

Title		Given names				
Surname						

Business address/details

Business name							
Unit/Street no.		Street					
Suburb				State		Postcode	

Postal address

Unit/Street no.		Street					
Suburb				State		Postcode	

Address for correspondence (select one)

Residential
 Business
 PO Box

Contact details

Res. tel.	()	Bus. tel.	()
Mobile		Fax	()
Email			

4. SIGNATURE OF THE PERSON WHO APPOINTED THE CURRENT PCA

Signature _____ Name _____

Date / /

5. DETAILS OF THE CURRENT PCA

Please identify who was appointed as the PCA (accredited certifier/council) for the development the subject of the development consent/complying development certificate identified above:

Name (where the PCA is an accredited certifier)

Title		Given names	
Surname			

Business address/details

Business name					
Unit/Street no.		Street			
Suburb			State		Postcode

Contact details

Res. tel.	()	Bus. tel.	()
Mobile		Fax	()
Email			

Accreditation number (where relevant) _____

Please **attach** a copy of the *Notice of Appointment of the PCA*.

6. SIGNATURE OF THE CURRENT PCA

Signature _____ Name _____

Accreditation no. (where relevant) _____

Name of authorised officer (where relevant) _____

Date / /

NB: Where the current PCA is the council, an authorised officer of the council must sign the application.

7. DETAILS OF THE REPLACEMENT PCA

Please identify the accredited certifier/council to be appointed as the replacement PCA for the development the subject of the development consent/complying development certificate identified above:

Name (where the replacement PCA is to be an accredited certifier)

Title		Given names	
Surname			

Business address/details

Business name							
Unit/Street no.		Street					
Suburb				State		Postcode	

Contact details

Res. tel.	()	Bus. tel.	()
Mobile		Fax	()
Email			

Accreditation number (where relevant) _____

8. SIGNATURE OF THE REPLACEMENT PCA

I consent to being appointed as the replacement PCA for the above development.

Signature _____ Name _____

Accreditation no. (where relevant) _____

Name of authorised officer (where relevant)* _____

Date / /

NB: Where the replacement PCA is to be the council, an authorised officer of the council must sign the application

9. SIGNATURE OF THE PERSON GIVING THE NOTICE

Signature _____ Name _____

Date / /

10. NOTICE FEE

Please **include** the fee to replace the PCA of \$40 with your notice.

The fee can be paid by cheque or money order (made payable to the Building Professionals Board) or contact the Building Professionals Board on 02 9895 5950 to pay by Visa/Mastercard.

11. CHECKLIST

Please **identify** the information you have attached to support your application

- Copy of the notice of appointment of the current PCA.
- Application fee.

12. WHERE TO SEND THE NOTICE

Please send the completed notice to:

The Director
 Building Professionals Board
 PO Box 3720
 PARRAMATTA NSW 2124

If you have any questions about your notice, please contact the Building Professionals Board - tel 02 9895 5950, fax 02 9895 5949 or email bpb@bpb.nsw.gov.au.