



Renewal of accreditation for private certifiers

This form is to renew your current **private** accreditation in the same category and with the same conditions (if any). You have private accreditation if your certificate of accreditation doesn't have the word 'council' in the heading (whether or not you work for a council).

You'll need to use a different form (available at www.bpb.nsw.gov.au) if:

- you hold 'council' accreditation, as noted in the heading on your certificate of accreditation
- your accreditation has expired, lapsed or otherwise been withdrawn
- you wish to change your accreditation category and/or conditions.

The fastest way to submit your form is via email to bpb-accreditation@bpb.nsw.gov.au

Provided your form is received on time, your accreditation will continue even if your form is still being processed after your accreditation is due to expire.

✓	Checklist: have you...?	Where?
	Had all attached documents certified by a Justice of the Peace or a Notary Public	All sections
	Attached a certified copy of your driver's licence (front and back)	Section 1
	Attached details if you answer yes to any question in the fit and proper person declaration ('suitability of the applicant' section)	Section 2
	Attached a certificate of currency and policy schedule for your professional indemnity insurance, issued by your insurer on the insurance company letterhead	Section 3
	Completed the statutory declaration in regards to the information in your form, attached documents, insurance and CPD	Section 4
	Paid the renewal fee – provide credit card details or EFT remittance advice	Section 5
	A1, A2 and A3 only: attached a copy of your certificate of completion for the mandatory complying development CPD course	N/A (this page)

Office use only – Date received:	Our reference:
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1. Your details

The following details will be published on the Board's online register of accredited certifiers. Make sure your details are correct so potential customers can contact you.

Title		Surname	
Given names			

Current accreditation


Accreditation no. (on your certificate of accreditation)		Expiry date	
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Business details – you must provide a street address, not just a PO Box

Unchanged?	Y / N (update below if needed)			
Business name (if applicable)				
Unit/ street no.		Street		
Suburb		State		Postcode
Mailing address (if different from above)				
Work phone		Mobile phone		
Email				

The following details **will not** be published on the online register but are required for our records.

Unchanged?	Y / N (update below if needed)	
Employment status	<input type="checkbox"/> Business owner or employee <input type="checkbox"/> Contractor	
Home phone		
Home address		

 **Attach** a certified copy of your driver's licence (front and back), or other photo ID showing your current home address. You must attach this even if your home address is unchanged.

2. Suitability of the applicant

You must answer each question below. Terms in **bold** are defined on the next page.



Attach details on a separate page if you answer yes to any question. You don't need to answer 'yes' for an **excluded offence**.

1. Have you ever contravened a law (whether or not in NSW and whether or not the contravention is an offence) that relates to the functions or obligations of a person as an accredited certifier or the holder of an equivalent authorisation or involves fraud or dishonesty?	<input type="checkbox"/> No <input type="checkbox"/> Yes (attach details)
2. Have you failed to comply with a statutory or other duty or a contractual obligation, imposed by or in accordance with a law (whether or not a NSW law) that relates to the functions or obligations of a person as an accredited certifier or the holder of an equivalent authorisation?	<input type="checkbox"/> No <input type="checkbox"/> Yes (attach details)
3. Are you an undischarged bankrupt?	<input type="checkbox"/> No <input type="checkbox"/> Yes (attach details)
4. Have you ever represented yourself as being an accredited certifier when you were not an accredited certifier?	<input type="checkbox"/> No <input type="checkbox"/> Yes (attach details)
5. Have you, whilst an accredited certifier, engaged in any conduct in breach of the code of conduct contained in schedule 4 of the accreditation scheme?	<input type="checkbox"/> No <input type="checkbox"/> Yes (attach details)
6. Are you a mentally incapacitated person?	<input type="checkbox"/> No <input type="checkbox"/> Yes (attach details)
7. Have you been found guilty of a criminal offence (other than an excluded offence), whether or not in NSW and whether or not a conviction has been recorded?	<input type="checkbox"/> No <input type="checkbox"/> Yes (attach details)
8. Are you aware of any criminal proceedings pending against you (other than for an excluded offence)?	<input type="checkbox"/> No <input type="checkbox"/> Yes (attach details)
9. Have you been found by a court or tribunal to have breached the <i>Environmental Planning and Assessment Act 1979</i> or the Regulations made under that Act?	<input type="checkbox"/> No <input type="checkbox"/> Yes (attach details)
10. Are there any proceedings pending before a court or tribunal in which it is alleged that you have breached the <i>Environmental Planning and Assessment Act 1979</i> or the Regulations made under that Act?	<input type="checkbox"/> No <input type="checkbox"/> Yes (attach details)
11. Have any claims been made against any insurance policy required to be held by you as an accredited certifier under the <i>Environmental Planning and Assessment Act 1979</i> or the <i>Building Professionals Act 2005</i> ?	<input type="checkbox"/> No <input type="checkbox"/> Yes (attach details)
12. Have you been involved in any civil litigation that involved your functions as an accredited certifier in the past 12 months?	<input type="checkbox"/> No <input type="checkbox"/> Yes (attach details)
13. Have you been subject to any disciplinary action, proceedings or determination in the past 12 months, including any investigations or actions that might lead to a disciplinary action, proceeding or determination?	<input type="checkbox"/> No <input type="checkbox"/> Yes (attach details)
14. Have you had an equivalent authorisation suspended or cancelled (other than at your request) under the law of another jurisdiction?	<input type="checkbox"/> No <input type="checkbox"/> Yes (attach details)
15. Do you hold an equivalent authorisation that is subject to conditions imposed as a result of any criminal, civil or disciplinary proceedings under the law of another jurisdiction?	<input type="checkbox"/> No <input type="checkbox"/> Yes (attach details)

Interpretation: terms used in section 2 'suitability of the applicant'

'**Equivalent authorisation**' means a certificate, accrediting registration or other authorisation or qualification issued or conferred under the laws of another jurisdiction that enables the holder to undertake similar functions to the holder of a certificate of accreditation under the *Building Professionals Act 2005*.

'**Mentally incapacitated person**' means a person who is a temporary patient, a continued treatment patient or a forensic patient within the meaning of the *Mental Health Act 1900*, or a protected person within the meaning of the *Protected Estates Act 1983*.

'**Excluded offence**' means any offence under the road transport legislation (within the meaning of the *Road Transport (General) Act 1999* other than:

- (i) an offence under section 42(1) of the *Road Transport (Safety and Traffic Management) Act 1999* relating to driving a motor vehicle negligently on a road or road related area if the accredited certifier concerned is, by way of penalty, sentenced to imprisonment or fined a sum of not less than \$200
- (ii) an offence under section 42(2) of the *Road Transport (Safety and Traffic Management) Act 1999* relating to driving a motor vehicle on a road or road related area furiously, recklessly or at a speed or in a manner dangerous to the public
- (iii) an offence under section 19(2) of the *Road Transport (General) Act 1999* (which relates to refusing to comply with a requirement to produce a driver licence, or to state name and home address, or stating a false name and home address).

Note: Under section 7 of the *Building Professionals Act 2005*, an application for renewal of accreditation can be refused if the applicant is not a fit and proper person.

3. Professional indemnity insurance

You must be covered by an individual, partnership or company insurance policy that meets the requirements of the *Building Professionals Act 2005*.



Attach an original certificate of currency for your insurance (or a certified copy) and policy schedule. The certificate must include, at minimum, all the information listed on the last page of this form.

Avoid delays in processing your renewal by giving a copy of the last page of this form to your insurance provider. Ensure that your provider provides a certificate of currency with all the required information and on the insurance company letterhead.

Under section 61 of the Building Professionals Act you must notify the Board in writing within seven days of becoming aware of any change to your insurance that is relevant to your accreditation (such as ceasing to hold insurance).

If you're a contractor working for a company or a council, you must have your own insurance.

Additional information required

If a **company** policy:

- How many accredited certifiers were directors or employees of the company on the date when the policy was issued? _____

or

- If the policy is the fourth or subsequent policy issued to the company, whether by the same or another insurer, what is the average number of accredited certifiers who have been directors or employees of the company during the previous three years? _____

If a **partnership** policy:

- How many accredited certifiers were partners or employees of the partnership on the date when the policy was issued? _____

or

- If the policy is the fourth or subsequent policy issued to the partnership, whether by the same or another insurer, what is the average number of accredited certifiers who have been partners or employees of the partnership during the previous three years? _____

4. Statutory declaration (Oaths Act 1900, NSW, Eighth Schedule)

I (your name), _____, do solemnly and sincerely declare that:

1. The statements made and the information provided in this application are to the best of my knowledge true and accurate, and that any document provided in support of the application is either the original or an accurate copy of the original
2. I am covered by current professional indemnity insurance that fully complies with the requirements of the *Building Professionals Act 2005* and the *Building Professionals Regulation 2007*
3. I will maintain the required fully compliant professional indemnity insurance during any period of accreditation granted by the Board and I will provide evidence of this insurance to the Board upon request;
4. I will notify the Board within seven days of any change in my professional indemnity insurance which may be relevant to my accreditation;
5. I have fully complied with the Building Professionals Board's continuing professional development requirements as set out in Schedule 5 of the Accreditation Scheme;

and I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the *Oaths Act 1900*.

Declared at (place) _____ on (date) _____

Signature of declarant: _____

in the presence of an authorised witness, who states:

I (name of authorised witness) _____,

a (qualification of authorised witness) _____,

certify the following matters concerning the making of this statutory declaration by the person who made it (*please cross out any text that does not apply)

1. *I saw the face of the person **or** *I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had special justification for not removing the covering, **and**
2. *I have known the person for at least 12 months **or** *I confirmed the person's identity using an identification document and the document I relied on was

(describe identification document relied on): _____.

Signature of authorised witness: _____ Date: _____.

Notes:

- This statutory declaration must be signed in front of a Justice of the Peace, Notary Public, Commissioner of Affidavits or a solicitor currently practising in NSW.
- This statutory declaration must be an original document and not a copy.
- Incorrect or misleading information may lead to your accreditation being cancelled. Under the *Crimes Act 1900*, the maximum penalty for giving false or misleading information is two years imprisonment and/or a \$22,000 fine.

5. Renewal fee (GST free)

Your form will only be processed if you pay the renewal fee:

- \$1,500 for A1-A4 and B1 categories (or a combination of these categories)
 - \$250 for A4 – Pathway 2 Student applicants only (Attach official evidence of current enrolment in a qualification recognised under schedule 3, part 2 of the Accreditation Scheme)
- or**
- \$750 for C1-C16 and D1 categories (or a combination of these categories)

Payment option 1. Visa or MasterCard

Credit card number																			
Name of card holder																			
Card type	<input type="checkbox"/> Visa		Expiry																
	<input type="checkbox"/> Mastercard																		

You may instead provide your credit card details over the phone by calling (02) 8522 7800.

Payment option 2. Westpac account details for EFT (direct deposit)

Account name	Building Professional Board		
BSB	032 001	Account number	115 578



Attach a copy of the remittance advice/ receipt for EFT payments. The payment reference should include your surname and the word 'renewal'.

Please note:

- we no longer accept cheques
- the Building Professionals Board's ABN is 57 391 058 258.

Submit your completed form with all required attachments

Email your form to bpb-accreditation@bpb.nsw.gov.au – the checklist on the first page lists all required attachments.

You may post your form to the address below but email submission will help us process it more quickly.

You will be notified when your form has been assessed.

Certificate of currency requirements

Certifiers: give this page to your insurance provider to ensure your certificate of currency includes the following minimum information and is issued on the insurance company letterhead.

Do not prepare the certificate yourself – it must be issued by your provider.

Instructions for insurance provider:

Issue a certificate of currency on the insurance company letterhead. The certificate **MUST** have ALL the following details:

- Insurance company name
- Confirmation that the insurance is professional indemnity insurance and covers statutory liability for accredited certifiers (see note below)
- Policy number
- Name of the insured
- Whether the policy is for an individual, partnership, or company
- Policy start and end dates
- Retroactive date
- Limit of indemnity and whether it is inclusive/ exclusive of relevant expenses in respect of any one claim (see note below)
- Limit of indemnity and whether it is inclusive/ exclusive of relevant expenses in respect of all claims made in any one year (see note below)
- The professions that the policy covers (it must cover 'accredited certifier')
- Confirmation that the insurance has been issued and date of issue

Note: the *Building Professionals Regulation 2007* defines statutory liability for accredited certifiers in clause 9 and relevant expenses in clause 14(5)(c).