

Architects (Intention to use the term Architect and Registered Architect) Approval 2004

Approval Statement for

Approved Form AF2004-9

made under the

Architects Act 2004, section 92 (Approved forms)

1 Name of instrument

This instrument is the *Architects (Intention to use the term Architect and Registered Architect) Approval 2004*.

2 Commencement

This instrument commences on the day after notification.

3 Approval

The attached form is approved for the purpose of an interstate architect to notify the board of their intention to use the term Architect and Registered Architect in the Australian Capital Territory.

Cynthia Breheny
Chair
ACT Architects Board
24 June 2004



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

Should your registration within the state/territory of which you hold residence expire, be cancelled, suspended and/or disqualified this notification will be subject to your eligibility.

Notification – Intention to Use the Term Architect and Registered Architect.

Interstate registrant 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 _____

Registration details for state/territory where you hold residence

State/Territory _____ Date first registered _____
 Registration No. _____ Registration expiry date _____



Please attach to this notification a certified copy of photo identification, which contains your current residential address.

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Have you been convicted or found guilty of an offence against the Architects Act 2004 or the Repealed Architects Act 1959?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:

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 and am aware of my responsibilities as stipulated within the ACT Architects Act 2004.

Signature _____ Date _____

Delivery options

IN PERSON – 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 – fax it to ACT Building, Electrical and Plumbing Control on fax number (02) 6207 6324

BY MAIL – post it to ACT Architects Board, GPO Box 1908, Canberra ACT 2601.

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

Office Use Only

Date Received

Date Processed