



ARCHITECTS BOARD OF WESTERN AUSTRALIA

Notification of Change of Recorded Details

Form 08

22 July 2014

Use of this Form

This form is to be used to notify the Board of changes to the registered and recorded details of natural persons and licensed corporations. It should be used in the following circumstances:

- change of name;
- change of contact details (no fee);
- change of directors or officers of a licensed corporation;
- change of responsible architects;
- removal from the register of defunct corporations (no fee);
- provision and update of insurance information (no fee); and
- advice of intention to amend a corporation's constitution.

For a change of name, a certified copy of a Deed Poll, Marriage Certificate or other relevant documentation must be attached. If the changed details relate to registered changes with the Australian Securities and Investment Commission (ASIC) a copy of the certificate issued by ASIC confirming the change must be attached.

If you are no longer practising architecture or your qualifications have been withdrawn or cancelled, please contact the Board.

Certificate of Registration / Licence

A replacement registration / licence document will only be issued prior to annual renewal if there is a change of name for the natural person or corporation or a change to the responsible architect/s for a corporation.

Fees

The fee to amend particulars entered in the register is \$25.50 (GST free).

Payment Method

Payment of fee to amend particulars entered in the register (\$25.50) can be made by:

- cheque or money order made payable to Architects Board of Western Australia;
- Visa or MasterCard; or
- cash or eftpos at the Board's office.

Privacy laws and use of this information

Information requested by the Board is strictly confidential. Only that information which is available for publication in the register may be provided to other registration authorities and to the public.

Further Information

Please contact the Board if you require further information.



ABWA use only

Date Received / /	Date Approved / /	Fees Paid \$	Receipt No.	Reg / Lic No.	Date Annual Cert Sent / /
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Notification of Change of Recorded Details

Form 08

22 July 2014

Natural Person

Change of Name

Previous Name _____

Previous Trading Name (if applicable) _____

New Name

New Trading Name (if applicable) _____

Registration Number _____

Description of proof of change of name accompanying form _____

Change of Contact Details

Name _____

New Address _____

Postcode _____

Work Phone _____

Mobile _____

Home Phone _____

Email _____

Corporation

Change of Name

Previous Corporation Name _____

Previous Trading Name (if applicable) _____

New Corporation Name

New Trading Name (if applicable) _____

Licence Number _____

ABN _____

ACN _____

Change of Contact Details

Name of Corporation _____

New Address _____

Postcode _____

Contact Person _____

Phone _____

Mobile _____

Email _____

Change of Company Director

Name of Corporation

If there are changes to the company director/s of a licensed corporation, a copy of an ASIC certificate confirming the registered changes of director/s and curriculum vitae for new directors must be submitted with this form.

Add Details of New Directors/Officers

Director/Officer 1

Full Name

Address

Architects Board of WA Registration Number (if applicable)

1. Have you been convicted of any offence in this state or elsewhere which has not been dealt with by a spent conviction order?
Yes No
2. Do you have any prosecutions pending against you?
Yes No
3. Are you, or have you previously been, registered as an architect in any State or Territory?
Yes No
4. If you answered yes to question 3:
 - (a) has your registration ever been suspended or cancelled?
Yes No
 - (b) have you ever been dealt with for misconduct?
Yes No

(c) are there any unresolved complaints pending against you?

Yes No

5. Have you ever been a director, officer, shareholder or employee of a corporation which has been the subject of disciplinary proceedings for the contravention of any statute in Western Australia or any other jurisdictions?
Yes No
6. Are there any other matters which may be relevant to your suitability as a Director of a licenced architectural corporation about which the Board should be informed?
Yes No

If you have answered 'yes' to any of the above, excluding question 3, please provide details in a sealed envelope and submit with this application.

I certify that the information supplied by me on this form is true and correct.

Signature

Director/Officer 2

Full Name

Address

Architects Board of WA Registration Number (if applicable)

1. Have you been convicted of any offence in this state or elsewhere which has not been dealt with by a spent conviction order?
Yes No



2. Do you have any prosecutions pending against you?

Yes No

3. Are you, or have you previously been, registered as an architect in any State or Territory??

Yes No

4. If you answered yes to question 3:

(a) has your registration ever been suspended or cancelled?

Yes No

(b) have you ever been dealt with for misconduct?

Yes No

(c) are there any unresolved complaints pending against you?

Yes No

5. Have you ever been a director, officer, shareholder or employee of a corporation which has been the subject of disciplinary proceedings for the contravention of any statute in Western Australia or any other jurisdictions?

Yes No

6. Are there any other matters which may be relevant to your suitability as a Director of a licenced architectural corporation about which the Board should be informed?

Yes No

If you have answered 'yes' to any of the above, excluding question 3, please provide details in a sealed envelope and submit with this application.

I certify that the information supplied by me on this form is true and correct.

Signature

Please attach separate pages for additional Directors.

Remove Company Director

Full Name

Full Name

Full Name

Full Name

Full Name

Change of Responsible Architect/s

Name of Corporation

Add New Responsible Architect/s

At least one registered architect who is an officer or employee of the corporation must have ultimate responsibility for the architectural work done by the corporation. For more information about responsible architects please see Information Sheet 05 – Responsible Architects which can be downloaded from the Board's website.

By signing below, the architect/s consent to being the person/s who will have ultimate responsibility for the architectural work to be done by the corporation.

Full Name

Registration Number

I consent to being a responsible architect for the corporation

Signature

Full Name

Registration Number

I consent to being a responsible architect for the corporation

Signature

Full Name

Registration Number

I consent to being a responsible architect for the corporation

Signature

Please attach separate pages if required.

Remove Responsible Architect/s

Full Name

Registration Number

Full Name

Registration Number

Full Name

Registration Number

Voluntary Removal of Corporation from the Register

Name of Corporation

Licence Number

Date Ceased Trading

Amend Corporation's Constitution

If amending the corporation's constitution, please attach a copy of the proposed resolution.

Name of Corporation

Trading Name (if applicable)

Licence Number

Update Insurance Information

Please attach a copy of the professional indemnity insurance certificate of currency showing the amount (minimum \$1,000,000) and period of cover.

Name

Name of Employer (if applicable)

Supporting Documentation Required

Please attach the following documents to this application form:

- Proof of change of name (if applicable);
- ASIC Company Statement showing any changes to the names of directors (if applicable);
- Curriculum vitae for new directors (if applicable);
- Copy of professional indemnity insurance certificate of currency (if applicable); and
- Proposed resolution if amending constitution (if applicable).

Submission of Application

This application form and supporting documents can be provided to the Board as original documents or via electronic transmission, i.e. facsimile or email.

Details of Person who Completed this Form

Full Name

Signature

Position Held

Date

Payment

Fees can be paid using one of the following methods.

Cheque

Send cheque or money order made payable to the Architects Board of WA.

Credit Card

- Visa MasterCard

Card Number

Expiry Date

Name on Card

\$25.50

Amount Payable

Cardholder's Signature

Date

Cardholder's Daytime Phone Number

In Person

Cash, credit card and eftpos payments can be made at the Board's office between 9:00am and 4:30pm Monday to Friday.