



**BOARD OF ARCHITECTS
OF QUEENSLAND**

TO: APPLICANTS FOR RESTORATION

In addition to the Application Form for Restoration to the Register of Architects in Queensland, if your registration lapsed more than two months from the date of receipt by the Board of the application, the Board also requires details of the circumstances which would support your application.

The provisions of Part 7 of the Act make it an offence, among other things, for an unregistered person to claim to be an architect, or hold him/herself out as offering architectural services.

Section 32 requires a registered person to notify the Board of a change of address within 21 days.

Your details should include a description of the reason why you failed to renew your registration.

*Level 3/ 87 Wickham Terrace
SPRING HILL QLD 4000*

**GPO Box 316
BRISBANE QLD 4001
Telephone 07 3069 2397
Email mail@boag.qld.gov.au
Website www.boag.qld.gov.au
ABN 47 081 662 530**

FEES FOR RESTORATION OF REGISTRATION

APPLICATION FEE \$267.05 + RESTORATION FEE \$300.80 = \$567.85 (GST EXEMPT)

REGISTRATION YEAR IS FROM 1 JULY TO 30 JUNE

Enquiries: 07 3069 2397

By Cheque for **\$567.85** made out to The Board of Architects of Queensland
Or
By Credit Card

Visa Mastercard Telephone payment cannot be accepted.

Cardholder's Name:

Card No. _ _ _ _ _

Payment A\$ Expiry Date:/

Signature:

Name:

Receipt Number:

Address:

Receipt Date:

.....

ID

A receipt will be issued.

***Fees are subject to change and are valid up to 30 June**

FORM 6

APPLICATION FOR RESTORATION OF REGISTRATION:

Section 23 Architects Act 2002



Privacy Statement

Your personal information is being collected on this form for the purposes of assisting the Board in determining whether or not a person is fit to practise as an architect, and to maintain the register of architects. This information is required to be collected under s.23(4) & (5) of the *Architects Act 2002*. Your name and contact details collected on this form will be made available for inspection by the public at the Board's office or on the Board's website. All other personal information collected on this form will not be disclosed to any third party without your consent unless authorised or required by law.

CONTACT DETAILS

Complete the following contact details in the space provided.

Full name:	Registration No.: (if known)
Business/Employer's Name:	
Business/Employer's address: <i>Must be a street address – a postal box is not acceptable</i>	
Business Phone Number:	
Mobile Phone Number:	
Fax Number:	
Email Address:	
Postal Address for correspondence:	
FITNESS TO PRACTISE	
<i>Answers to the following questions must be provided pursuant to section 11 of the Architects Act 2002. If your answer to any of the following questions is "Yes", please provide details on a separate but attached page/s. The following information is for the purposes of the Board only.</i>	
Do you have a conviction, other than a *spent conviction for any of the following:	
(i) an indictable offence; or	Yes / No
(ii) an offence against the <i>Architects Act 2002</i> or the repealed <i>Architects Act 1985</i> ; or	Yes / No
(iii) any other offence relating to the practice of architecture, against a law applying, or which applied, in Queensland, or the Commonwealth or any other State or Territory of Australia or a foreign country?	Yes / No
* Spent conviction means a conviction for which the rehabilitation period under the <i>Criminal Law (Rehabilitation of Offenders) Act 1986</i> has expired and not revived under that Act.	

Has your registration to practise as an architect under a law applying or that applied in the Commonwealth, another State or Territory of Australia or a foreign country been cancelled or suspended by the relevant registration body?	Yes / No
Has any application by you for registration as an architect been refused by any registration board?	Yes / No
Since 1 January 2003: (i) have you been made bankrupt; (ii) have you compounded with your creditors; or (iii) have you as a debtor, otherwise taken, or applied to take, advantage of any law about bankruptcy?	Yes / No Yes / No Yes / No
Have you been an executive officer of a corporation which, since 1 January 2003: (i) has executed a deed of company arrangement under the <i>Corporations Act</i> ; or (ii) has been the subject of a winding-up, whether voluntarily or under a court order, under the <i>Corporations Act</i> ; or (iii) has been the subject of an appointment of an administrator, liquidator, receiver or receiver and manager under the <i>Corporations Act</i> ?	Yes / No Yes / No Yes / No
Is there any other issue which could affect your ability to competently practise as an architect, including for example, the current state of your mental or physical health?	Yes / No
Continuing Professional Development Have you maintained competency in the practice of architecture? Practising architects must undertake a minimum of 20 hours of continuing professional development (CPD) each year.	Yes / No

Applicant's Declaration:

I, the above applicant for restoration of registration with the Board of Architects of Queensland, do hereby make application for my registration to be restored and by virtue of the particulars contained in this application sincerely declare that the particulars shown in this application, both in this and the preceding pages, and also in any other documents provided with this application are true and correct in every particular.

Applicant's Signature: **Date:**

On completion of this application, please forward it together with any documentation required, and your fees to:	The Registrar Board of Architects of Qld Level 3 Phone: (07 3069 2397) GPO Box 316 87 Wickham Terrace BRISBANE QLD 4001 SPRING HILL Qld 4000 Email: mail@boa.qld.gov.au
For your protection all payment details are required on a separate form and will be destroyed after three months. Please see page 2.	

A receipt will be issued.