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Application for Reinstatement to the Register of Architects in South Australia

Personal Details		A copy of the certificate of currency from your insurer	
		ANI	D/OR
Family Name			Form 12 – Employers Declaration and copy of Certificat of Currency
Given Names		OR	·
Title Date of Birth	Gender		Form 13 – Application for Exemption from the requirements for professional indemnity insurance.
Street Address Postcode		Fitn 1.	ess to Practise Have you been convicted of an offence or the subject of disciplinary action in this state or elsewhere since the larenewal of your registration, or if you have been registered for less than one year since the date of your first registration?
Postal Address (if different from above			first registration? Yes No
Postcode Please nominate your contact address for correspondence and publication in the Register Postal Street		2.	Has your registration ever been suspended or cancelled by a registration or professional body?
		3.	Have you ever been dealt with for misconduct by a Registration Board or professional body?
Business Phone			Yes No
Mobile		4.	Has any application by you for registration as an architect been refused by any registration board or professional body?
Email Address			Yes No
Former SA Registration Number Registration Number Date of Removal from Register		5.	Do you have any prosecutions or unresolved complaint pending against you?
			Yes No
Professional Indemnity Insurance Professional Indemnity insurance is require		6.	Are there any other matters which may be relevant to your suitability for registration as an architect about which the Board should be informed?
either as an individual or through you One or more of the following is requi			Yes No
		7.	Have you notified the Board of any legal claim alleging negligence?
			Yes No
			ou have answered 'yes' to any of the above, please mit details in an attachment to this application.

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National Police Certificate (NPC)

You must satisfy the Board that you are a fit and proper person to practise as an architect. A Police check is one of the items required to satisfy this fit and proper person requirement for registration. A valid NPC no older than 3 months must accompany your application for reinstatement. The applicant is responsible for the cost of obtaining the NPC.

I have attached a certified copy of a current National Police Certificate.

Declaration by Applicant

I consent to the Architectural Practice Board of South Australia making enquiries of, and exchanging information with the authorities of any Australian States or Territories, or other countries, regarding my practice as an architect or otherwise regarding matters relevant to this application.

I do solemnly and sincerely declare that the statements made in this application are true and correct in every particular to the best of my knowledge and belief; that I am the person named in the attached documents and that I make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the *Oaths Act 1936*.

Full N	Name of Applicant
Signa	ature of Applicant
Decla	ared at
this _	day of20
 Befor	re me (Signature) (Refer next column)
Print	Name
Indic	ate whichever is applicable
	A Notary Public

include name of town or place where situated)

NOTE: All witnesses must provide their registration or identity number and if applicable, their seal or stamp when witnessing the Declaration and any certified accompanying documentation.

Please note:

Failure to lodge the reinstatement form, required documents and fee by the due date may result in the removal from the Register without further notice.

This form must be completed and returned to The Architectural Practice Board of South Australia by email to admin@archboardsa.org.au accompanied by the non-refundable Renewal Fee and Reinstatement Fee. (Payment can be made by cheque or money order or by electronic funds transfer to the Architectural Practice Board of SA's bank account at BankSA; Adelaide Branch, BSB 105-900; Account No 950111640). Please include a copy of the transaction record with your application.

Lodgement and payment can be made by email to admin@archboardsa.org.au, by post or personally at the Board's office BY APPOINTMENT ONLY.

Please check you have completed all applicable items and include the fee payable. Incomplete applications will be returned to you and not considered lodged with the Board.

Checklist of Documents to be Enclosed:

Certified copies of identification documents (1 Category Adocument plus 1 Category B or 2 Category C documents (Refer Form 01 – Information Sheet)
Certified copy or original of National Police Clearance (no more than 3 months old)
Professional Indemnity Insurance □ Certificate of Currency; and/or
□ Form 12 – Employer's Declaration and Certificate of Currency; or
□ Form 13 – Application for Exemption
Reinstatement Fee
Renewal Fee