



**ACT**

Government

Environment and Sustainable Development

# Form CL3

## Application for a Construction Practitioner Licence - Organisation

*Construction Occupations (Licensing) Act 2004*

### Type of Application

**New Application**

**Reapplication**

(Generally where a licence has expired for up to a 5 year period)

**Renewal**

(Renewal application must be made prior to expiration of licence)

Licence number .....

### Organisation Details

**Company**

Attach a recent "**Historical Company Extract**" from the Australian Securities and Investment Commission (ASIC) [www.asic.gov.au](http://www.asic.gov.au)

**Partnership**

Attach a partnership agreement dated and signed by all partners that includes the name of the partnership and a statement of agreement and for all partners – Full name, Date of birth and addresses

Organisation Name

ACN (if company)

Contact person

Postal Address

Suburb

State

Postcode

Business Address

Suburb

State

Postcode

Phone Number  
Business Hours

Mobile

Facsimile Number

EMAIL ADDRESS

## Construction Occupation

Does your organisation currently hold or previously held a licence in the ACT?

No  Yes Licence number \_\_\_\_\_

Indicate the Construction Occupation relevant to this application:

- Asbestos Removalist
- Builder
- Building Surveyor
- Drainer
- Electrician
- Gasfitter
- Plumber
- Plumbing Plan Certifier
- Works Assessor

**Note: The occupation class or classes (including restrictions and/or endorsements) will be determined based on the licence class or classes held by the nominee or nominees.**

## Prior Convictions

Have any directors/partners been convicted or found guilty of an offence involving fraud, dishonesty or violence punishable by imprisonment for 1 year or more?  No  Yes provide details:

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## Financial Resources

(only applicable to new applications or reapplications)

Do you have or have access to financial resources adequate to complete any work that will be authorised under the licence being applied for?  No  Yes Provide (attach) a letter from your bank, finance provider or accountant regarding your financial resources.

## Nominees

Name	_____		
Licence number	_____	Construction occupation	_____
Occupation class	_____	Licence endorsements	_____

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I am a:     Director                       Employee                       Partner

I agree to the appointment as nominee for (organisation) \_\_\_\_\_

I understand my responsibilities as a nominee under the *Construction Occupations (Licensing) Act 2004* in relation to the supervision of construction services and ensuring that those construction services comply with relevant legislative requirements.

Signature \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

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Name	_____		
Licence number	_____	Construction occupation	_____
Occupation class	_____	Licence endorsements	_____

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Signature \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

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Name		
Licence number	Construction occupation	
Occupation class	Licence endorsements	

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I understand my responsibilities as a nominee under the *Construction Occupations (Licensing) Act 2004* in relation to the supervision of construction services and ensuring that those construction services comply with relevant legislative requirements.

Signature \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name		
Licence number	Construction occupation	
Occupation class	Licence endorsements	

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I am a:  Director  Employee  Partner

I agree to the appointment as nominee for (organisation) \_\_\_\_\_

I understand my responsibilities as a nominee under the *Construction Occupations (Licensing) Act 2004* in relation to the supervision of construction services and ensuring that those construction services comply with relevant legislative requirements.

Print name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## Application Fees

Fees apply to this application and will vary depending on the relevant occupation or occupations. Please refer the ACT Planning and Land Authority "**Fees and Charges Booklet**" available on the ACTPLA website [www.actpla.act.gov.au](http://www.actpla.act.gov.au)

## Declaration

As a  Director  Partner of the organisation I declare that all the information contained and attached to this application is complete, accurate and true to the best of my knowledge and appoint the nominees as listed in this application. I understand that there are severe penalties for providing false or misleading information. I declare that I understand that corporations and partnerships may only be licensed to undertake construction services of the type for which the nominee or nominees are licensed for including restrictions and/or endorsements

Signature \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## Privacy Notice

Information you are asked to provide will be used to assess your ability to be licensed under the *Construction Occupations (Licensing) Act 2004*. The lawful authority for the collection of this information is the *Construction Occupations (Licensing) Act 2004*. The information may be disclosed to other Registration Authorities. If your application is successful your details will be entered into the Licensing Register. Some of this information will be made available on the ACT Planning and Land Authority's website

## Contact Details:

ACT Planning and Land Authority  
Customer Service Centre  
GPO Box 1908, Canberra City 2601  
16 Challis Street, Dickson ACT 2602

Business Hours: 8.30am to 4.30pm weekdays (excluding Public Holidays)

Phone: (02) 6207 1923

Fax: (02) 6207 1925

TTY: (02) 6207 2622

Email: [actpla.customer.services@act.gov.au](mailto:actpla.customer.services@act.gov.au)

Website: [www.actpla.act.gov.au](http://www.actpla.act.gov.au)