

APPLICATION FOR A CONSULTING ENDORSEMENT BY A
SURVEYOR (INDIVIDUAL)
FORM 08A – VERSION 1502

Form approved under s191 of the Surveyors Act 2003 for an application under s45

PHONE 07 3839 7744
Email: admin@sbq.com.au

Privacy Statement – Under Section 68 of the Surveyors Act 2003, the Board maintains a Register of Surveyors which is accessible by the public. Personal information is collected for the purpose of assisting the Board to carry out the duties defined in the Act. The Act requires the public part of the register to be published. A registrant's name and type of registration will be published on the Board website. Other contact information will only be disclosed to third parties with the written consent of the registrant.

PLEASE PRINT ALL INFORMATION AND RETURN FORM TO:

Surveyors Board of Queensland, PO Box 656 Spring Hill QLD 4004

Full Name: _____

Postal Address: _____ PC: _____

Other Address: _____ PC: _____

Email: _____

Phone No. (B/H): _____ Mobile: _____

Fax (B/H): _____ Phone No. (A/H): _____

Name of Employer: _____

Employment Details: Start date: _____ Principal / Director / Employee please circle

Date of Birth: _____

Languages Spoken (other than English): _____

In support of my application, I enclose the following documentary evidence:

Applicant Checklist

- Competency Certificate as provided by SIBA (Spatial Industries Business Association)
- A copy of Professional Indemnity Insurance (min \$1,000,000) or Certificate of Currency
- A copy of your business letterhead
- Application Fee and Registration Fee <http://sbq.com.au/member/registration/schedule-of-fees/>

THE REGISTER (s68 (5)): Do you consent to your Contact Information, as advised above, being accessible within the publicly available part of a Register of Surveyors? YES NO

Do you know of any matter related to your character, honesty and integrity which would affect your application? If yes, please provide additional information in a separate document? YES NO

Do you consent for the Board to have full access to your plan audit records with DNRM for the purpose of conducting the Board's business under the Surveyors Act 2003? YES NO

I hereby apply for registration as a Consulting Surveyor. I solemnly and sincerely declare that the above information is true and correct. I make this solemn declaration conscientiously believing the same to be true.

Signature of Applicant: _____ Date: _____

Fees can be paid either by cheque or money order payable to the "Surveyors Board of Queensland" OR by credit card (MASTERCARD or VISA card)

Name on Card: _____

Card Number: _____ / _____ / _____ / _____

Exp Date: ____ / ____ Cardholder Signature: _____

For direct deposit enquiries, please contact the office for bank details.

Office use only	
Fee:	
Date:	
Rec No.:	