

Application to Terminate a Victorian Private Building Surveyor – *Company/Trust ownership*

Pursuant to Section 81 of the Building Act 1993 (Vic)

This application may be completed by the Property Owner /Agent on behalf of the Property Owner / Relevant Building Surveyor

Do not complete this form, if you answer **yes to questions (i) to (iv) below**

- (i) Are you applying to terminate a building surveyor for **multiple sites**? (please email vbaterminations@vba.vic.gov.au with this information instead of completing this form)
- (ii) Is the site owned by an individual? (please complete an [Application to Terminate a Victorian Private Building Surveyor - Individual owner](#) form)
- (iii) Is the building Surveyor **unable to practice** because of death, disability? (please complete [Notice of Intention to Appoint a new Building Surveyor](#) form)
- (iv) Has the **building work/building permit** been **cancelled**? (You do not need to apply for a termination please notify your council and complete the VBA's [Notice of Intention to Cancel Building Work](#) form)

1. ARE YOU ACTING ON BEHALF OF OR ARE YOU THE: (Choose one)

Beneficiary of the Trust that owns the property

a. Do you have written authorization from each of the trustees of the trust to make this application? **Attach Copy**

b. Provide a copy of the Deed of Trust **Attach Copy**

Trust Name

Trustee Name

ABN

Company Director

a. Please provide a copy of an extract from ASIC (Australian Securities and Investments Commission) that shows the names of the Director(s) **Attach copy of ASIC extract**

Company or Body Corporate Name

ACN

ABN

b. If a company is set up with two or more directors Provide Authority to Act signed by two Directors **Attach copy of Authority to Act**

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2. APPLICANT CONTACT DETAILS

Title (Mr, Mrs, etc)	Given names	Family names (Surname)	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Position held at the company/trust (If applicable)		Name of the company/trust (if applicable)	
<input type="text"/>		<input type="text"/>	
Postal Address (Please include Lot No., Street No, Unit or Level, Street Name, Suburb and Postcode)			
<input type="text"/>			
Home telephone	Business telephone	Mobile phone	Email
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

3. PROPERTY OWNER CONTACT DETAILS (Only complete is different to applicant contact details above)

Title (Mr, Mrs, etc)	Given names	Family names (Surname)	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Position held at the company/trust (If applicable)		Name of the company/trust (if applicable)	
<input type="text"/>		<input type="text"/>	
Postal Address (Please include Lot No., Street No, Unit or Level, Street Name, Suburb and Postcode)			
<input type="text"/>			
Home telephone	Business telephone	Mobile phone	Email
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

4. CERTIFICATE OF TITLE **Attach Copy***

5. BUILDING WORK LOCATION (One location only*)

Lot number	Street number	Unit or level number
<input type="text"/>	<input type="text"/>	<input type="text"/>
Street name	Suburb	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>

6. DESCRIPTION OF THE BUILDING WORK

7. DETAILS OF THE STATUS OF BUILDING WORK

a. Has a building permit been issued for this building work by the relevant building surveyor?

Yes - What is the building permit number? **Attach copy***

No

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b. Has the building work commenced?

Yes

No

c. Do you intend to complete the building work?

Yes

No

d. Has a building notice or building order been issued for the building work?

Yes

Building notice OR Building order **Attach copy** (if you answered Yes)

No

8. DETAILS OF THE FIRST RELEVANT BUILDING SURVEYOR APPOINTED

Title (Mr, Mrs, etc) Given names Family names (Surname) Registration Number (**MUST**)

Name of the company (if applicable)

Postal Address (Please include Lot No., Street No, Unit or Level, Street Name, Suburb and Postcode)

Home telephone Business telephone Mobile phone Email

9. DATE OF APPOINTMENT OF THE FIRST RELEVANT BUILDING SURVEYOR

Date

Provide a copy of the appointment (*either document below is accepted*)

Section 80, or **Attach copy***

Copy of the Application for a Building Permit

10. DID THE APPLICANT APPOINT THE RELEVANT BUILDING SURVEYOR?

Yes

No

11. DID ANOTHER PERSON APPOINT THE RELEVANT BUILDING SURVEYOR?

Yes - Provide information:

No **Attach copy***

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12. IS THERE MORE THAN ONE BUILDING SURVEYOR APPOINTED FOR THE SAME WORK?

- Yes (go to **question 13** - provide details of the second building surveyor)
- No (skip to **question 17**)

13. DETAILS OF THE SECOND RELEVANT BUILDING SURVEYOR APPOINTED (if applicable)

Title (Mr, Mrs, etc) Given names Family names (Surname) Registration Number (**MUST**)

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Name of the company (if applicable)

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Postal Address (Please include Lot No., Street No, Unit or Level, Street Name, Suburb and Postcode)

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Home telephone Business telephone Mobile phone Email

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14. DATE OF APPOINTMENT OF THE SECOND RELEVANT BUILDING SURVEYOR

Note: It is an offence under the Building Act 1993 section 79 (2) a person must not appoint a private building surveyor to complete any functions set out in section 76 in respect of a building or building work if another building surveyor has already commenced to carry out the functions in respect of that building or building work.

Date

Provide a copy of the appointment

Attach copy (if you answered Yes to Q12)

- Section 80 or
- Copy of the Application for a Building Permit

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15. HAS THE BUILDING WORK CHANGED?

Yes (*go to question 16*)

No (*skip to question 17*)

16. PLEASE DESCRIBE HOW THE BUILDING WORK HAS CHANGED.

17. EXPLAIN THE REASON/S FOR THE TERMINATION OF THE APPOINTMENT OF THE FIRST BUILDING SURVEYOR? (NO MORE THAN 500 WORDS)

TO FACILITATE THE TRANSFER OF THE APPOINTMENT

18. HAVE YOU DISCUSSED YOUR INTENTIONS TO TERMINATE THE FIRST BUILDING SURVEYOR'S APPOINTMENT WITH THE BUILDING SURVEYOR?

Yes, (please attach their letter of agreement to terminate their appointment)

Attach letter of agreement
OR

No, (please provide a reason below and attach evidence to back up your reason why you cannot get the first building surveyor to agree to terminate their appointment)

copy of evidence*

19. HAVE YOU IDENTIFIED A NEW BUILDING SURVEYOR WHO IS WILLING TO TAKE OVER THE TRANSFER OF THE FUNCTION FOR THIS APPOINTMENT OR BUILDING WORK?

Yes (please attach their letter of acceptance to take over transfer)

Attach copy*

No, **Do not submit this application yet.** The VBA cannot grant a termination unless you have identified a new building surveyor willing to take over the transfer.

20. CONTACT DETAILS OF THE PROPOSED NEW RELEVANT BUILDING SURVEYOR WILLING TO ACCEPT THE TRANSFER OF FUNCTIONS

Title (Mr, Mrs, etc)

Given names

Family names (Surname)

Registration Number (**MUST**)

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Name of the company (if applicable)

Postal Address (Please include Lot No., Street No, Unit or Level, Street Name, Suburb and Postcode)

Home telephone

Business telephone

Mobile phone

Email

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It is important to note, that the applicant is to endeavor to complete the application form and to provide all the supporting information/documentation when submitting this form.

If supporting documents are missing the application will be returned to the applicant so please use the checklist below to ensure you application is processed in a timely manner.

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Checklist of documents required to support this application		
Description	Relates to Question	Tick Enclosed items
Authority letter for all beneficiary of the Trust OR company director(s)	1*	<input type="checkbox"/>
Deed of Trust OR ASIC extract with the names of the directors	1*	<input type="checkbox"/>
Certificate of Title	4*	<input type="checkbox"/>
Building Permit number	7.a*	<input type="checkbox"/>
Copy of building notice if any (pursuant to section 106) OR building orders if any (pursuant to section 37)	7.d*	<input type="checkbox"/>
Section 80 Appointment from the first relevant building surveyor OR Application for Building Permit from the first relevant building surveyor	9*	<input type="checkbox"/>
Section 80 Appointment from the second relevant building surveyor OR Application for Building Permit from the first relevant building surveyor	14	<input type="checkbox"/>
Letter from the first relevant building surveyor willing to be terminated OR relevant evidence of attempts to contact	18*	<input type="checkbox"/>
Letter from the new relevant building surveyor willing to accept the transfer of functions	19*	<input type="checkbox"/>

* Denotes what documents are required for **ALL** applications

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DECLARATION

I declare that the information given in this form and any attached documents is true and correct, to the best of my knowledge. I agree the information I have given in this form and any attachments may be used or disclosed by the Victorian Building Authority to process this request.

Applicant Name

Signature of Applicant

Date

YOUR PRIVACY

By lodging this application with the Victorian Building Authority (VBA) you agree that the information you have provided herewith and any attachments may be used or disclosed by the VBA to process this application. The VBA does not disclose the name of any parties or subjects except where required to or authorised by law to do so. Personal information about an individual is collected and handled in accordance with the *Data and Privacy Act 2014*.

Applications generally take approximately 42 days to complete, when all of the required information is submitted with the application.

HOW TO LODGE THIS APPLICATION AND COPIES OF ANY DOCUMENTS

Scan and Email:

customerservice@vba.vic.gov.au

Post:

Victorian Building Authority
G P O Box 536
Melbourne VIC 3001

Deliver in person:

Victorian Building Authority
Goods Shed North
733 Bourke Street
Docklands VIC 3008