

PLUMBING LICENCE

HERE'S WHAT YOU NEED TO DO

SAVE AND COMPLETE THIS FORM ON YOUR COMPUTER. DO NOT HANDWRITE.

Checklist

Please tick once you have completed these sections of the application form:

- Part A:** What we need to know about you
- Part B:** Classes of plumbing work in which you seek to be licensed
- Part C:** Your qualifications
- Part D:** Declaration
- Part E:** Your signature
- Part F:** Application fee and payment method
- Part G:** Photo Identification Form
- Part H:** National Police Check

Please tick once you have certified copies of your supporting document (do not send originals):

- Certified copies of supporting documents

Remember, every supporting document that you submit with this application for **parts C and D** must be certified as a true copy of an original. See page 3 for a list of people who can certify a document for you.

Note: The information provided in an application must be true and correct. It is an offence under s221V of the *Building Act 1993* to give false or misleading information in relation to an application for registration, and this offence carries a maximum penalty of 50 penalty units. If you provide false or misleading information, we may refuse your application.

How to submit your application

Please fill out your application form electronically, then print and sign a hard copy.

Submit a hard copy of your application by mail:



Victorian Building Authority
GPO Box 536
Melbourne VIC 3001

Or in person at the VBA:



Goods Shed North
733 Bourke Street
Docklands VIC 3008

Privacy – Collection Notice

HOW THE VBA USES AND DISCLOSES YOUR PERSONAL INFORMATION

The Victorian Building Authority (ABN 78 790 711 883) is a body corporate established under the *Building Act 1993* (Vic) (**VBA**). The VBA's contact information is as follows:

Address: Goods Shed North, 733 Bourke Street, Docklands Vic 3008.
Telephone: 1300 815 127

The VBA is committed to protecting the privacy of your personal information in accordance with the *Privacy and Data Protection Act 2014* and the VBA's Privacy and Privacy Statement as amended from time to time.

The personal information you provide to the VBA, including any images or photographs and any and all details provided in this Application Form, will be used by the VBA to process your application. If you do not provide all or any part of the information requested in this Application Form, the VBA may be unable to process and subsequently grant your application.

The VBA may also use such information for the following purposes:

- (a) Verify information provided in support of your application.
- (b) Research, planning, to meet the VBA's operational requirements, assessing the merit and impact of proposed regulatory reforms and to assist in the development and delivery of services by the VBA (whether to you personally or a member of the public).
- (c) Law enforcement by the VBA or other regulatory bodies, including prosecutions or disciplinary action against you if required.
- (d) The production and administration of building and plumbing practitioners' identification cards.
- (e) Maintaining disciplinary and licensing and registration registers for building and plumbing practitioners (published on the VBA's website).
- (f) To enable the VBA to meet its statutory obligations or functions.
- (g) Such other purposes as required by law or authorised under the privacy legislation.

The VBA may also share your personal information with third parties including, but not limited to, different business units within the VBA, the Building Appeals Board, Consumer Affairs Victoria, the Victorian Managed Insurance Authority, your insurer, other regulators (both in Victoria and interstate), your clients and the VBA's staff and/or service providers who need to know such information to perform services for the VBA.

The VBA will only disclose your personal information to a third party claiming to act on your behalf (for example, your solicitor or interpreter) with your prior written consent.

You can request access to the personal information which the VBA holds about you. If you become aware that personal information the VBA holds about you is not accurate, complete or up to date, you can ask the VBA to correct it.

The VBA's full Privacy Policy and Privacy Statement are available at www.vba.vic.gov.au/privacy. By submitting your application to the VBA, you are deemed to have acknowledged and consented to the VBA using and disclosing your personal information as set out in this Notice.

People who can certify copies of original documents

People working in these occupations

Chiropractor
Dentist
Legal practitioner
Medical practitioner
Nurse
Optometrist
Patent attorney
Pharmacist
Physiotherapist
Psychologist
Trade marks attorney
Veterinary surgeon

Others

Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public

Australian Consular Officer or Australian Diplomatic Officer (within the meaning of the *Consular Fees Act 1955*)

Bailiff

Bank officer with five or more continuous years of service

Building society officer with five or more years of continuous service

Chief executive officer of a Commonwealth court

Clerk of a court

Commissioner for Affidavits

Commissioner for Declarations

Credit union officer with 5 or more years of continuous service

Employee of the Australian Trade Commission who is:

- (a) in a country or place outside Australia, and
- (b) authorised under paragraph 3 (d) of the *Consular Fees Act 1955*, and
- (c) exercising his or her function in that place

Employee of the Commonwealth who is:

- (a) in a country or place outside Australia, and
- (b) authorised under paragraph 3 (c) of the *Consular Fees Act 1955*, and
- (c) exercising his or her function in that place

Fellow of the National Tax Accountants' Association

Finance company officer with five or more years of continuous service

Holder of a statutory office not specified elsewhere in this list

Judge of a court

Justice of the Peace

Magistrate

Marriage celebrant registered under Subdivision C of Division 1 of Part IV of the *Marriage Act 1961*

Master of a court

Member of Chartered Secretaries Australia

Member of Engineers Australia, other than at the grade of student

Member of the Association of Taxation and Management Accountants

Member of the Australian Defence Force who is:

- (a) an officer, or
- (b) a non-commissioned officer within the meaning of the *Defence Force Discipline Act 1982* with five or more years of continuous service, or
- (c) a warrant officer within the meaning of that Act

Member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the Institute of Public Accountants

Member of:

- (a) the Parliament of the Commonwealth, or
- (b) the Parliament of a state, or
- (c) a territory legislature, or
- (d) a local government authority of a state or territory

Minister of religion registered under Subdivision A of Division 1 of Part IV of the *Marriage Act 1961*

Notary public

Permanent employee of the Australian Postal Corporation with five or more years of continuous service who is employed in an office supplying postal services to the public

Permanent employee of:

- (a) the Commonwealth or a Commonwealth authority, or
- (b) a state or territory or a state or territory authority, or
- (c) a local government authority, with five or more years of continuous service who is not specified elsewhere in this list

Person before whom a statutory declaration may be made under the law of the state or territory in which the declaration is made

Police officer

Registrar, or Deputy Registrar, of a court

Senior Executive Service employee of:

- (a) the Commonwealth or a Commonwealth authority, or
- (b) a state or territory or a state or territory authority

Sheriff

Sheriff's officer

Teacher employed on a full time basis at a school or tertiary education institution

Member of the Australasian Institute of Mining and Metallurgy

Reference number

Date

Part A

WHAT WE NEED TO KNOW ABOUT YOU (THE APPLICANT) * INFORMATION THAT YOU MUST SUPPLY

Your title* Mr Mrs Ms Miss

Your first name* (as it appears on your drivers licence or passport)

Your middle name

Your family name* (as it appears on your drivers licence or passport)

Your date of birth*

Your residential address* (must not be a post office box)

Suburb

State or territory

Postcode

Your postal address (if different from residential address)

Your contact details:

Email address*

Mobile number*

Home phone number

Work phone number

Fax number

LET US KNOW YOUR CURRENT REGISTRATION STATUS

Are you currently registered in Victoria to carry out any class or specialised class of plumbing work (including a restricted registration or a provisional registration)?

Yes No

Are you currently licensed in Victoria to carry out any class or specialised class of plumbing work (including a restricted licence)?

Yes No

✔ If YES, specify your practitioner number and the category and class in which you are currently registered:

Part B

LET US KNOW THE CLASS IN WHICH YOU SEEK TO BE LICENSED

Select the class(es) of plumbing work in which you seek to be licensed :

Main classes of plumbing work

- Drainage work
- Fire Protection work
- Gasfitting work
- Irrigation (Non-agricultural) work
- Mechanical Services work
- Roofing (Stormwater) work
- Sanitary work
- Water Supply work

Specialised classes of plumbing work

- Backflow Prevention work
- Refrigerated Airconditioning work
- Type A Appliance Conversion work
- Type A Appliance Servicing work
- Type B Gasfitting work
- Type B Gasfitting Advanced work

Are you registered in all the class(es) in which you are applying to be licensed? Yes No

If no, which classes are you not registered in?

LET US KNOW YOUR QUALIFICATIONS

Have you successfully completed any of the following units of competency from the Certificate IV in Plumbing and Services?

- Establish legal and risk management requirements of small business Yes No
- Carry out work based risk control processes Yes No
- Estimate and cost work Yes No

If you are applying for a licence in **Drainage work**, have you successfully completed:

- Design and size sanitary drainage systems Yes No
- Design and size stormwater drainage systems Yes No
- Design and size domestic treatment plant disposal systems Yes No

If you are applying for a licence in **Fire Protection work**, have you successfully completed:

- Design residential and domestic fire sprinkler systems Yes No
- Commission and maintain special hazard and fire suppression systems Yes No

If you are applying for a licence in **Gasfitting work**, have you successfully completed:

- Design and size consumer gas installations Yes No

If you are applying for a licence in **Mechanical Services work**, have you successfully completed:

- Design, size and lay out heating and cooling systems Yes No

If you are applying for a licence in **Roofing (Stormwater) work**, have you successfully completed:

- Design and size roof drainage systems Yes No

If you are applying for a licence in **Sanitary work**, have you successfully completed:

- Design and size sanitary plumbing systems Yes No

If you are applying for a licence in **Water Supply work**, have you successfully completed:

- Design and size heated and cold water services and systems Yes No

If you are applying for a licence in **Backflow Prevention work**, have you successfully completed:

- Commission and maintain backflow prevention devices Yes No

If you are applying for a licence in **Type A Appliance Services work**, have you successfully completed:

- Service Type A gas appliances Yes No

If you are applying for a licence in **Type B Gasfitting work**, have you successfully completed:

- Install, commission and service Type B gas appliances Yes No

1. For each the above units of competency that you hold, please provide:

- the name of the registered training organisation (RTO) that awarded the unit of competency
- the state in which the RTO is located
- the year in which the unit of competency was awarded.

eg. Victoria University, VIC, 2010

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2.	<input type="text"/>
3.	<input type="text"/>
4.	<input type="text"/>
5.	<input type="text"/>
6.	<input type="text"/>

2. For each of the above units of competency that you hold, please attach the following document to your application:



- a certified copy of Record of Results stating the unit(s) of competency achieved

See page 3 for a list of people who can certify a document for you.

Note: If you are not already registered in the class of plumbing work in which you seek to be licensed, we will write to you to request further information.

DECLARATION

1. Have you been convicted of any offence involving fraud, dishonesty, drug trafficking or violence that was punishable by imprisonment for 6 months or more? Yes No
2. Have you been convicted of an offence under any law regulating plumbing work or specialised plumbing work? Yes No
3. Have you had your authorisation to carry out plumbing work or specialised plumbing work suspended or cancelled for any reason other than failure to renew that authorisation? Yes No
4. Have you ever been insolvent under administration? Yes No
5. Have you ever been convicted of an offence against:
 - (a) the *Fair Trading Act 1985*? Yes No
 - (b) the *Fair Trading Act 1999*? Yes No
 - (c) the *Trade Practices Act 1974*? Yes No
 - (d) the Australian Consumer Law (Victoria)? Yes No
 - (e) the *Competition and Consumer Act 2010* (Cwlth)? Yes No
6. Are you currently disqualified from acting as a licensed or registered plumber (or equivalent occupation that is regulated)? Yes No

✔ If YES for any of the above questions, please provide details here:

⚠ Please remember when filling out the information below, if you do not provide sufficient detail the VBA will request further information from you. This will increase the processing time of your application.

What were the offences or breaches?

PART D CONTINUES NEXT PAGE

When did the event occur?

In which state or territory did the event occur?

What were the circumstances of the event?

What penalty did you receive?

What you have done to prevent the event from occurring again?

Part E

YOUR SIGNATURE

- I authorise the Victorian Building Authority to conduct a police record check.
- I declare that the information contained in this application, including attachments, is true and correct.
- I consent to the VBA disclosing any information provided in support of this application, including additional information provided prior to the determination of this application, for the purpose of verifying that information.

Signature of applicant

(must be a handwritten signature)

Date of signature

It is an offence under section 221V of the *Building Act 1993* to give false or misleading information in relation to an application for registration. This offence carries a maximum penalty of 50 penalty units.

Part F

APPLICATION FEE AND PAYMENT METHOD

The fee to lodge your application is **\$55.49** including GST.

Please select your payment method:

- credit card
- cheque
- money order

Please make cheques and money orders payable to: **Victorian Building Authority**

Note: The VBA does not accept cash.



CREDIT CARD PAYMENT DETAILS

Card type:

Visa Mastercard

Amount:

Card number:

Name of card holder:

Card expiry date:

/

Signature of card holder

(must be a handwritten signature)

Date of signature

/ /



**PLEASE DO NOT PRINT FORM PAGES ON THE BACK OF THIS PAGE
BECAUSE THIS PAGE WILL BE DESTROYED.**

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PHOTO IDENTIFICATION FORM

Complete and submit this form with your application if:

- › you are not currently registered or licensed as a plumbing practitioner in Victoria

OR

- › you are currently registered or licensed as a plumbing practitioner in Victoria, and your last application to the Victorian Building Authority (VBA) to be registered or licensed was lodged more than three years ago.

If we grant your application for registration, we will issue you with an identification card showing your name, your photograph and the classes or specialised classes of plumbing work that you are authorised to perform.

Your details

First name

Last name

Your date of birth

 / /

Photo requirements

You must provide two photos of yourself with your application.

- Print your name on the back of each photo.
- Affix the two photos in the space below with double sided tape. Do not place any tape on the front of the photos.

The photos must be:

- › identical
- › in colour
- › less than six months old
- › 4.5–5 cm in height and 3.5–4 cm in width
- › without a border
- › good quality gloss prints on photo paper.
- › be in sharp focus
- › have a plain, light-coloured background
- › be uniformly lit (no shadows or reflections)
- › look directly at the camera
- › not have hair or garments covering your face
- › have a neutral expression (not laughing, smiling or frowning).

In the photo, you must:

For office use only

Application reference number

Practitioner identification number

AFFIX PHOTO
HERE

AFFIX PHOTO
HERE

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NATIONAL POLICE CHECK

To support your application we require you to undertake a national police check, via our online service provider. Once we receive this application we will send you an email, containing a secure link, to enable you to complete the national police check application quickly and efficiently.

END OF APPLICATION FORM