

**Compliance Certificate**  
Transfer Form



**Address:** GPO Box 536, Melbourne VIC 3001  
**Phone:** 1300 815 127 **Fax:** (03) 9618 9049  
**Email:** VBA360.Portal@vba.vic.gov.au

**Business Details**

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Contact Person: \_\_\_\_\_

**Practitioner that the Certificates are being transferred from**

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Licence Number: \_\_\_\_\_ Date of birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

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

**Note:** If the above practitioner no longer needs to be covered by your insurance, please inform your insurance company of this.

**Practitioner that the Certificates are being transferred to**

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Licence Number: \_\_\_\_\_ Date of birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

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

**Compliance Certificates to be transferred**

Certificate Numbers:

Once you have completed this form, please return it to:

**Victorian Building Authority**  
**GPO Box 536, Melbourne VIC 3001**