



Form 2C – Application for Approval of a Building Work Supervisor

Licensing and Registration

Level 3
Chesser House
91-97 Grenfell Street
Adelaide SA 5000

GPO Box 1719
Adelaide SA 5001

Tel 131 882

www.cbs.sa.gov.au

Office Use Only	
Licence / Registration No	
Application fee	\$103.00
Registering Officer	

Please Note:

1. Please print clearly. Write in CAPITALS where appropriate.
2. If space provided is insufficient provide additional information on a separate piece of paper.
3. This application should be accompanied by the fee stated at the top of this form and cheques should be made payable to the Commissioner for Consumer Affairs.

There are penalties for deliberately making a false or misleading statement in this application. A maximum penalty of \$10,000 applies. By lodging this application you are authorising the Commissioner for Consumer Affairs to make any inquiries necessary to determine this application.

Contact details

To ensure we can assess this application promptly, please name a contact and their telephone number:

Contact Name _____ **Daytime telephone** _____

Section 1 Details of contractor

Title Mr Mrs Miss Ms Company

Surname / Company name _____

Full given names _____

Builders Licence number _____

Address for Service (postal address) _____

Postcode _____

Residential address _____

Postcode _____

Home telephone _____ **Work telephone** _____

Mobile number _____

Section 2 Details of supervisor

Full name of supervisor you are seeking approval for: _____

Builders registration number: _____

If you have lodged an application with our office, please write 'application is pending' in the above space.

If you *do not hold* a Supervisors Registration, you cannot be nominated as a supervisor.

Section 3 Particulars for approval of registered supervisor

1. What building work are you performing, that you are licensed to do, as a Contractor?

2. What building work will be supervised by the Supervisor?

Note: The *Building Work Contractors Act 1995*, section 19(4), provides that the nominated supervisor must be a director of the applicant company or an employee of the applicant contractor. Sub-contractors are not eligible to be nominated as an entity's nominated building work supervisor.

3. If the contractor is a company, is the nominated supervisor a director of the company?

YES NO

4. Is the nominated supervisor an employee of the contractor?

YES NO

Signatures:

Of applicant

Director or secretary of the company

Statement by Supervisor

I, _____ agree to be nominated as the supervisor for the above named applicant.

Signature:

Nominated supervisor

Confidentiality: There are Secrecy Provisions under the Fair Trading Act that prohibit the release of information supplied by you (or your partner) to any unauthorised person or organisation except under special circumstances such as a Court subpoena or where another Agency has the legislative authority to inspect our files and records.

Where to lodge this form

In person

Consumer and Business Services
Licensing and Registration
Level 3 Chesser House
91-97 Grenfell Street
ADELAIDE SA 5000

Post

Consumer and Business Services
Licensing and Registration
GPO Box 1719
ADELAIDE SA 5001

Telephone

Builders Licensing: 131 882
Translating and Interpreting Service (TIS)
Telephone 131 450

The Act and Regulations can be obtained from:

Service SA Government Legislation Outlet
108 North Terrace
Adelaide SA 5000
Telephone 13 23 24
or download from www.legislation.sa.gov.au

Visit us on the web

www.cbs.sa.gov.au

Payment of fees

Payment of fees can be made by:

- cash (in person only)
- money order
- cheque, or
- credit card (Visa, MasterCard accepted).

EFTPOS facilities are available at our Adelaide office only.

All fees are payable to the Commissioner for Consumer Affairs.

The **fee amount** applicable to your application should appear under the Statutory Declaration section of this application form. If this is not the case, please contact us at our Adelaide Office for further assistance.

Cheque or Money Order Payments

I hereby enclose my cheque or money order (*circle whichever is applicable*) made out to the Commissioner for Consumer Affairs for the amount of \$_____.

Credit Card Payments

I hereby authorise the Commissioner for Consumer Affairs to debit my **Visa** or **MasterCard** (*circle whichever is applicable*) for the amount of \$_____.

Card holder's name

Card holder's signature

Date

Card holder's contact number

Client ID:

Licence Number:

Credit card number

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Expiry date

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CVV Number