



Ministry of Business, Innovation & Employment



Annual Re-licensing Application – Your BP number:

Please print clearly in blue or black pen and complete all required sections.

Name and postal address details

Full name	
Street address	
Suburb	
City	
Postcode	

Residential address details

Street address	
Suburb	
City	
Postcode	

Contact details

Daytime	
Evening	
Mobile	
Number on Register	
Email address	
Website address	

Body corporate details

Body corporate (ie, Current employer, your company, or self-employed)	
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Skills Maintenance Record

Important: You must provide your Record of Skills Maintenance every two years. The form is attached.

I attach my Skills Maintenance Record I do not attach my Record of Skills Maintenance form as I obtained the required points last year, or this is my first year and I will complete my record next year.

Confirmation of Continued Practice

Please tick relevant box:

- I confirm that I have been working in an area related to the building industry and relevant to the licence/s I hold and I wish to remain licensed
- I confirm over the next year I will **not** be working in an area related to the building industry and relevant to the licence/s I hold. Therefore I wish to **suspend** my status as a licensed building practitioner and attach the appropriate form.
- I confirm that I will **not** be working in the foreseeable future in an area related to the building industry and relevant to the licence/s I hold. Therefore I wish to **cancel** my status as a licensed building practitioner and attach the appropriate form.

All forms can be found at www.LBP.govt.nz under I'm an LBP or phone 0800 60 60 50.

Payment

Enclosed is the payment for continued licensing – tick the applicable box

Annual fee	\$97.00
The Scheme levy	\$142.00
Total payable	\$239.00

Important: if the requested information and payment are not received by the required date in the reminder letter sent to you, a late charge of \$25.56 will apply (total of \$264.56 will be payable).

- Cheque made out to the "Ministry of Business, Innovation and Employment"
- Credit card – enter details below

Payment by Credit Card

- Visa Mastercard

Credit Card Number				
Expiry Date	/ (month/year)			
Name on the card				
Cardholders Signature				

Declaration

I declare that the information that I have supplied in this form is true and correct. I understand that it is an offence under the Building Act 2004 to intentionally provide incorrect or misleading information.

Applicant's signature

Date signed

Privacy notice: Any personal information submitted in this application will be kept and maintained by the Registrar and the Building Practitioners Board in accordance with the New Zealand Privacy Act 1993. Personal information will also be used for the maintenance and administration of the Licensed Building Practitioners Register. You have the right to access, and to have corrected, any information about you that is held by the Registrar and the Building Practitioners Board.

If you decided not to use the LBP online system please send forms to:

The Registrar of LBPs, Ministry of Business, Innovation and Employment, PO Box 50041, Porirua 5240

Failure to provide the information and payment will result in suspension.

Save time—relicense online. You can relicense at
www.LBP.govt.nz

OFFICE USE ONLY – MONTH	
Type of payment	
Amount paid	\$
Date received	
Initials	