

END OF VOLUNTARY SUSPENSION OF LICENCE FORM

Complete this form if your licence is voluntarily suspended and you would like to revive it. Please note that the requirements to end the Voluntary suspension might include:

- > Paying all or some of the relicensing fee;
- > Providing evidence of your skills maintenance activities while you have been on a voluntary suspension

Send the completed form by:

Post: OR Email:

Licensed Building Practitioners' Scheme Ministry of Business, Innovation and Employment PO Box 1473 Wellington 6140 bplicensing@lbp.govt.nz

LICENSED BUILDING PRACTITIONER DETAILS

Full name:		
BP number:		
Date of birth:	day month year	
POSTAL ADDRESS		
Postal address:		
Suburb:	Town/city:	Postcode:



CONTACT DETAILS
Daytime: Evening:
Mobile:
Email address:
REQUEST TO END SUSPENSION DETAILS
Effective from: day month year
I wish to revive my suspended licence in the following licence class(es):
Design Carpentry Brick and Blocklaying Foundations Site Roofing External Plastering
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 / / day month year

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 2020. 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.