|  |
| --- |
| This form is applicable where a private certifier is engaged by a client and not the owner to perform private certifying functions for a building or building assessment work.  Section 143A(5) of the *Building Act 1975* requires the client to give notice to the private certifier of any changes to the owner’s name or contact details within five business days of becoming aware of the changes.  This Form 34 may be used by the client to notify the private certifier that the owner’s name or contact details have changed. |

#### 1. Property description

The description must identify all land the subject of the application.

The lot and plan details (e.g. SP/RP) are shown on title documents or a rates notice.

If the plan is not registered by title, provide previous lot and plan details.

|  |  |  |  |
| --- | --- | --- | --- |
| Street address |  | | |
|  | | Suburb/locality |  |
| State | Choose an item. | Postcode |  |
| Lot and plan details *(attach list if necessary):* | | | |
|  | | | |
| Local government area the land is situated in: | | | |
|  | | | |

#### 2. Owner’s previous details

If the owner is a company, a contact person must be shown.

All correspondence will be mailed to this address.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name *(in full)* | |  | | | |
| Company name *(if applicable)* | |  | | | |
| Contact person | |  | | | |
| Business phone number | |  | | Mobile |  |
| Email address | |  | | | |
| Postal address | |  | | | |
|  | | | Suburb/locality | |  |
| State | Choose an item. | | Postcode | |  |

#### 3. Owner’s new details

Identify the new owner’s details where appropriate.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name *(in full)* | |  | | | |
| Company name *(if applicable)* | |  | | | |
| Contact person | |  | | | |
| Business phone number | |  | | Mobile |  |
| Email address | |  | | | |
| Postal address | |  | | | |
|  | | | Suburb/locality | |  |
| State | Choose an item. | | Postcode | |  |

#### 4. Private certifier’s details (client to complete)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name of building certifier *(in full)* | |  | | | | | |
| Company name *(if applicable)* | |  | | | | | |
| Contact person | |  | | | | | |
| Business phone number | |  | | Mobile | |  | |
| Email address | |  | | | | | |
| Postal address | |  | | | | | |
|  | | | Suburb/locality | | |  | |
| State | Choose an item. | | Postcode | | |  | |
| Licence number | |  | | | | | |
| Signature |  | | | | Date | | Click or tap to enter a date. |

#### 5. Client’s details

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name *(in full)* | |  | | | |
| Company name *(if applicable)* | |  | | | |
| Contact person | |  | | | |
| Business phone number | |  | | Mobile |  |
| Email address | |  | | | |
| Postal address | |  | | | |
|  | | | Suburb/locality | |  |
| State | Choose an item. | | Postcode | |  |
| Licence number | |  | | | |

#### 6. Client’s signature

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Date | Click or tap to enter a date. |