



Application for Registration as a Practising Architect

THE ARCHITECTS' ACT 1929 - Tasmania

To the Registrar
Board of Architects of Tasmania
Email: registrar@architectsboardtas.org.au

GPO Box 457 Hobart Tas 7001
Tel: 03 6234 8188

I, the undersigned, do hereby apply for registration in the Class of Practising Architect under the Architects' Act 1929 and acknowledge my responsibilities under the Code of Practice including being covered by sufficient level of Professional Indemnity Insurance at all times and complying with the continuing professional development requirements

Registration Number	Last Name		
Salutation (Mr/Mrs/Ms/Dr...)	Given Names		
Gender	☐ Male	☐ Female	☐ Other
	Date of birth	/	/
Email Address	Place of Birth		
Your email address will be used as your primary contact address so please ensure you advise us of any changes			
Business Name/Employer	ABN		
Business Address			
Private Address			
Preferred Postal Address	☐ Business Address	☐ Private Address	
Other			
Phone Number		Mobile phone	
Academic Qualification	Date		
Institution			

Professional Indemnity Insurance

In signing this form, I acknowledge that a failure to be covered by, and maintaining a sufficient level of professional indemnity insurance may result in disciplinary action. Not being covered by professional indemnity insurance will result in immediate suspension of registration.

☐ The Responsible architect for my employer has provided confirmation that I am covered by the firms insurance policy for work undertaken by that employer

I certify that I am not an undischarged bankrupt or had my registration as an architect refused, suspended or cancelled anywhere in Australia

Applicant Signature:

Dated: / /

The completed form is to be signed by the Applicant and lodged with the Registrar, with fees of \$44.10 for Registration to 31 December 2026, \$19.60 for Certificate and \$98.00 Application fee, totaling \$161.70 (No GST) be paid into the Board's Commonwealth Bank account 067 000 2804 5734