Application for Registration in Western Australia under Mutual Recognition

Form.02

Architects Board of Western Australia

12 December 2025

Use of this Form

This form is to be used by people wishing to apply for registration as an architect in Western Australia, who are already registered in another Australian State or Territory, or in New Zealand.

If you have never been registered in Australia or New Zealand, and have passed the Architectural Practice Examination, please use *Form 01 – Application for Registration as an Architect* which is available from the Board's website.

Mutual Recognition

Under the Commonwealth Mutual Recognition Act 1992, a person who is registered to practise an occupation in one State or Territory is entitled to practise an equivalent occupation in another State or Territory, after notifying the local registration authority. The State of Western Australia has adopted this Act and, consequently, a person is entitled to be registered as an architect in Western Australia if he or she is a registered architect in another State or Territory.

The State of Western Australia has also adopted the Commonwealth Trans-Tasman Mutual Recognition Act 1997 which allows a person who is registered to practise an occupation in Australia to practise an equivalent occupation in New Zealand after notifying the local registration authority and vice versa. Consequently, a person registered as an architect in New Zealand is entitled to be registered in WA.

Note that a person registering as an architect in Western Australia under mutual recognition has to comply with Western Australian disciplinary provisions and renewal of registration requirements such as holding professional indemnity insurance and maintaining a satisfactory level of knowledge, skill and competence in the practice of architecture.

Professional Indemnity Insurance

Professional indemnity insurance (PII) is required for practising architects either as an individual, or through your employer's policy. If you are obtaining your own PII, you must provide the Board with a copy of the certificate of currency for your policy. If you will be insured through your employer's PII policy, you must provide the Board with <u>both</u> a letter from your employer naming you as an insured employee and a

copy of the certificate of currency for your employer's policy.

Note that the certificate of currency must show the period of cover and amount insured, with the minimum amount required being \$1,000,000.

Continuing Professional Development

The Board has to be satisfied that a person has maintained a satisfactory level of knowledge, skill and competence in order to renew their registration. For more information, please refer to *Information Sheet 02 – Continuing Professional Development Framework* (available from the Board's website).

Certificate of Registration

The Board recommends architects clearly display registration certificates and their registration number on all correspondence and advertising.

Change of Recorded Details

Following registration, if there is any change to your recorded details, such as a change in name, contact details or insurance cover, you must inform the Board. Please use *Form 08 – Notification of Change of Recorded Details* which is available from the Board's website

You are also required to contact the Board if your circumstances change and you are no longer practising architecture, or if your qualifications have been withdrawn, or cancelled.

Annual Renewal of Registration

The registration period runs from 1 July to 30 June each year.

Fees

Application Fee \$184 (GST free)
Registration Fee \$263 (GST free)

Total Fees payable \$447 (GST free)

In the event your application is declined, the registration fee of \$263 will be refunded.



Payment Method

Payment of the application and registration fee (\$499) can be made by:

- · Visa or Mastercard; or
- eftpos at the Board's office or over the phone.

Privacy Laws and use of this Information

Information requested by the Board is strictly confidential. Only that information which is available for publication in the register may be provided to other registration authorities and to the public.

Further Information

Please contact the Board if you require further information:

T. (08) 9287 9920

E. info@architectsboard.org.au

architectsboard.org.au



	Please list all jurisdictions in which you are currently registered as an architect.
Family Name	<u> </u>
	1
Given Names	2
Preferred Name (Known as)	 3
	4
Date of Birth	5
Gender □ Female □ Male	Please submit with your application a letter from the registration authority in your home jurisdiction that verifies your registration details. The letter must not be
Address	more than one month old.
	Academic Qualifications
	Academic Qualification
Postcode	
	Date Conferred
Name of Business or Employer Work Phone	Have you successfully completed any of the following Architects Accreditation Council of Australia (AACA) processes?
	· □ Overseas Qualification Assessment
Mobile	── □ National Program of Assessment
Home Phone	If not, please contact the Board's office.
Email	What was the date of your successful completion of the AACA process listed above?
	Architectural Practice Examination
	Place of Completion
	Date of Completion

Current Registration



Personal Details

Fi	tness to	Practise
1.	suspended	registration ever been cancelled or d due to disciplinary action in any of the ns where you hold registration?
	☐ Yes	□ No
2.	any other practising	e subject of any disciplinary action or in way prohibited or restricted from architecture in any of the jurisdictions hold registration?
	☐ Yes	□ No
3.		conditions been imposed on your existing n in any of the jurisdictions where you tration?
	□ Yes	□ No
ple	ou have arease provid th this appli	nswered "Yes" to any of the above, e details in a sealed envelope and submit cation.
Pr	ofession	nal Indemnity Insurance
pra pro the	actising arc ovide a cop	ndemnity insurance is required for hitects in Western Australia. You must y of the certificate of currency showing minimum \$1,000,000) and period of
w	ebsite	

Your contact details can be made available via the "Search the Register" function on the Board's website.

☐ I would like my address, work phone number and email address to be made available on the Board's website.

Supporting Documentation Required

Please attach the following documents to this application form (assemble in the order as listed).

- ☐ Certified* copy of driver's licence or passport;
- ☐ Letter from registration authority in your home jurisdiction (not more than one month old);
- ☐ Copy of professional indemnity insurance (PII) certificate of currency - either your own policy or a copy of your employer's policy, if you are to be insured through their policy;
- ☐ Copy of letter from your employer naming you as an insured employee (only required if you are to be insured through your employer's PII policy).
- Documents can be certified by a Justice of the Peace, architect, doctor, lawyer, pharmacist, bank manager or equivalent.

Declaration by Applicant

The following declaration must be signed in the presence of a person qualified to witness Statutory Declarations (eg: a Justice of the Peace, architect, doctor, lawyer etc.).

Ι,

Full Name of Applicant

sincerely declare that this application is true and correct and I know that it is an offence to make a declaration knowing that it is false or misleading in a material particular.

I certify that the letter from the registration authority in my home jurisdiction is an original or a complete and accurate copy of the original.

I authorise the Board to make enquiries and exchange information with other registration authorities regarding my existing registration.

This declaration is made under the Oaths, Affidavits and Statutory Declarations Act 2005.

N
Signature
Date
Declared at
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Mitnaca
Vitness
- II N I
Full Name
Qualification

Submission of Application

Signature

This application form and supporting documents can be provided to the Board in hard copy or by email.



Fees can be paid using one of the following methods:
Credit Card
□ Visa □ Mastercard
Card Number
Expiry Date
Name on Card
Amount Payable
Cardholder's Signature
Date
Cardholder's Daytime Phone Number

In Person

Payment

Credit card and eftpos payments can be made at the Board's office between 9am and 4pm, Monday to Friday or by phone – 08 9287 9920

