Please fill in this form if you want to renew your practising licence.

Your application will take up to five working days to process. If we need any more information we will contact you by email.

CPD is a requirement when renewing your practising licence. If you have not yet completed CPD, please visit: <u>https://www.pgdb.co.nz/trade/cpd/</u>

Please email this completed form to <u>licensing@pgdb.co.nz</u>.

PERSONAL DETAILS:						
Surname:			First Name(s):			
Date of birth (dd/mm/yyyy):			Gender:	MaleFemalePrefer not to disclose:		
Phone:			PGDB number:			
Postal address:	Street number and name	9:				
	Suburb:					
	City/Town:			Post code:		
Email:						
Ethnicity:	New Zealand Pākehā		Indian			
	New Zealand European		Chinese			
	Māori		South African			
	Pasifika		Other			
	European					

PUBLIC REGISTER DETAILS:							
-	Our Act requires us to have a public record of all registered Plumbers, Gasfitters and Drainlayers. This						
helps the public to hire people who are allowed to do restricted work. Your entry on the public register must have:							
<ul> <li>your name</li> </ul>	people you supervise	• street add	drace				
<ul> <li>current licence(s)</li> </ul>		<ul> <li>a work en</li> </ul>		dress			
<ul> <li>registration histo</li> </ul>		(if you ha					
Contact phone							
number for public							
register:							
Tick if same as pg1 □							
Work email for							
public register:							
Tick if same as pg1 $\Box$							
Address for public	Street number and name:						
register:							
	Suburb:						
Tick if same as pg1 🗆	City/Town:	Post code:					
FITNESS TO PRAC							
	o any of the following questions, please attach	the following	docur	nenta	tion t	0	
your application:	anation of the relevant matter						
	<ul> <li>a full written explanation of the relevant matter</li> <li>any relevant documents e.g. decisions, charges, letters, health certificates.</li> </ul>						
1. Have you been investigated by the Police or have any charges been laid							
by the Police in New Zealand or overseas since you last renewed your 🛛 YES 🔲 NO							
practising licence?							
2. Have you been convicted of any criminal offences in New Zealand or						NO	
overseas since you last renewed your practising licence?						NO	
3. Have you been convicted of any disciplinary offence in relation to							
plumbing, gasfitting or drainlaying in New Zealand or overseas since you 🛛 YES 🔲 NO						NO	
last renewed your practising licence?							
4. Has your plumbing, gasfitting, or drainlaying registration or licence been							
cancelled, suspended, or restricted, or have you been disqualified from							
doing any kind of plumbing, gasfitting or drainlaying in New Zealand or overseas since you last renewed your practising licence?							
	. , , ,						
5. Have you developed a mental or physical health condition since you last							
renewed your practising licence which may affect your ability to safely 🛛 YES 🔲 NO							
carry out plu	carry out plumbing, gasfitting or drainlaying work						

LICENCE TYPE:							
Select	which licen	ice(s) you are app	olying fo	r. You can select multiple t	rades:		
Any licences renewals that are not certifying, must have the supervising certifier(s) complete							
Page 4 of this application form and have an active certifying practising licence(s) in the relevant							
trade(	s)						
	Certifying	7 Plumher		Restricted Plumber (complete pg4)			
	Certifying	Gasfitter		Gasfitter (complete pg4)		Restricted Gasfitter (complete pg4)	
	Certifying	Drainlayer		Drainlayer (complete pg4)		Restricted Drainlayer (complete pg4)	
FEES:							
		be based on wha	t licence	e(s) you have applied for. Pl	ease no	te: A credit card fee of	
1.90%	will be char	rged when payme	nts are	made by either a Visa or Ma	astercar	d credit or debit cards.	
Please	e see our fee	es at <u>https://www</u>	.pgdb.co	o.nz/trade/fees/			
One lie		(			Three licences:		
□ \$100 Licensing fee +		tee	□ \$200 Licensing fee +		□ \$300 Licensing fee +		
□ \$275 Disciplinary Levy		iry Levy	Second Se		□ \$275 Disciplinary Levy		
□ \$4.	□ \$4.50 Physical Licence card (optional)						
ΤΟΤΑΙ	TOTAL \$						
Card n	Card number:						
Card e date:	expiry						
Name	on card:						
Contae numbe cardhe							
Cardho signat		I authorise the Plumbers, Gasfitters and Drainlayers Board to charge the total amount to my credit card or debit card (including the credit card fee of 1.90% charged when payments are made by either a Visa or Mastercard credit or debit cards.):					

## SUPERVISION - To be completed by your supervisor(s) if you are not a certifier

By signing this form, you agree to comply with your responsibilities as a supervisor and understand:

- 1. You must ensure sanitary plumbing/gasfitting/drainlaying (where relevant) undertaken by the applicant:
  - a. Is performed competently;
  - b. Is subject to appropriate safety measures; and
  - c. Complies with the requirements of all relevant regulations, including regulations made under the Building Act 2004 (and the Gas Act 1992 for gasfitting).
- 2. You must ensure that the applicant
  - a. Is competent to perform the tasks undertaken;
  - b. Is adequately supervised while carrying out sanitary plumbing/gasfitting/drainlaying;
  - c. Complies with all relevant regulations, including regulations made under the Building Act 2004 (and the Gas Act 1992); and
  - d. Can produce their current licence card on demand.

3. You can have a 'Nominated Person' to provide physical supervision of the applicant. The Nominated Person must be registered and hold a current licence as a plumber/gasfitter/drainlayer (where relevant). This does not include restricted licence holders. You remain responsible at all times for all aspects of the work done by the applicant even where you have nominated another registered and licensed plumber/gasfitter/drainlayer to provide physical supervision of that work.

- 4. You must verify (or certify for gasfitting) work where verification or certification is required.
- 5. You must notify the Board if your supervision of the applicant ceases. You remain responsible for all sanitary plumbing/gasfitting/drainlaying undertaken by the applicant until we receive written notice that you are no longer supervising that person, or until their licence expires. Use your PGDB app, trade login, or email <u>licensing@pgdb.co.nz</u> to notify us.

CERTIFYING PLUMBER SUPERVISOR:				
Licence Number:		Full Name:		
Date:		Signature:		

CERTIFYING GASFITTER SUPERVISOR:				
Licence Number:		Full Name:		
Date:		Signature:		

CERTIFYING DRAINLAYER SUPERVISOR:				
Licence Number:		Full Name:		
Date:		Signature:		

## **APPLICANTS DECLARATION:**

By submitting this application, I declare that the information I have provided is true and correct.

The Board collects personal information, including your name, address, contact details, and billing information, to process your application and maintain the public register. Your information is handled, stored and kept secure in accordance with the Privacy Act 2020. The Board will not share your personal information unless it is necessary to do so for the purpose for which the information was collected, you have consented to its disclosure, or where disclosure is required or permitted by law. Any third parties who may have access to your information for permitted purposes will be subject to the Board's information security and privacy requirements. You may request access to your personal information and request that it is corrected if any of that information is inaccurate.

Applicants signature:		Date:	
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