

COMPLETING THIS FORM

- Use BLACK pen only
- Print clearly in BLOCK LETTERS
- DO NOT use correction fluid – any amendments should be crossed out and initialled

Please complete all details of this application where applicable. All items marked with an *asterisk must be completed before submitting. The claimant must ensure all details are correct.

This form is to be used to request an adjudication certificate under section 30 of the *Building and Construction Industry Payments Act 2004* (Qld) (BCIPA):

- if the respondent has failed to pay the whole of the adjudicated amount; and,
- 5 (five) business days have passed since the adjudication decision was served on the respondent; or the due date for payment stated in the decision has passed; whichever occurs later.

1. ADJUDICATION DECISION DETAILS

*Adjudication decision number	<input type="text"/>	* Adjudicated amount as stated in decision	\$ <input type="text"/>
*Payment claim amount (excl GST) as stated in decision	\$ <input type="text"/>	Interest to be stated on certificate for overdue amount as calculated by the claimant	\$ <input type="text"/>

2. CLAIMANT DETAILS

To assist processing you must provide a Claimant name as stated in the adjudication decision

*Name company/individual	<input type="text"/>																
*Postal address	<input type="text"/>																
	<input type="text"/>										State	<input type="text"/>			Postcode	<input type="text"/>	
*Physical address: (For inclusion in affidavit)	<input type="text"/>																
	<input type="text"/>										State	<input type="text"/>			Postcode	<input type="text"/>	
Business ph	<input type="text"/>																
Mobile ph	<input type="text"/>										Fax	<input type="text"/>					
*Email	<input type="text"/>																
*Contact person	<input type="text"/>																

PRIVACY NOTICE:

The functions of the registrar of the adjudication registry include the collection of statistical data and other information relevant to the administration of the registry. Information you provide in this form may be collected for that purpose.

Information about the QBCC's Privacy Policy is available on our website.

OFFICE ONLY	Date lodged	<input type="text"/>	Time lodged	<input type="text"/>	Office location	<input type="text"/>
	Received by	<input type="text"/>	Total pages/folders/boxes	<input type="text"/>	Fee amount	<input type="text"/>
	Receipt no.	<input type="text"/>	Application emailed to Registry	<input type="text"/>	Date & time	<input type="text"/>

3. CERTIFICATE DELIVERY DETAILS

*Preference for delivery Postal address Collect from QBCC Brisbane Email and Post Agent postal, complete agent details below

Name of Agent acting for claimant (if applicable)

Address

State Postcode

Business ph

Mobile ph Fax

Email

Contact person

4. FEES

Payment claim amount (excl GST)	Certificate fee
0-\$25,000	\$57.35
more than \$25,000	\$114.70

I will be paying:

by cheque - please make cheque and money orders payable to the **Queensland Building and Construction Commission**.

Cheque/money order number _____ Total \$ _____

by credit card (QBCC cannot accept American Express or Diners Club)

Credit card number

Expiry date / VISA Mastercard

Amount paid \$.

Cardholder's name

Cardholder's signature

5. DECLARATION

I, _____ hereby apply for an adjudication certificate under section 30 of the *Building and Construction Industry Payments Act 2004* (BCIPA).

I declare that:

- I am the claimant, or the legal representative of the claimant, to whom this application relates;
- the adjudicator's decision has been served on the respondent;
- the respondent has failed to pay the whole or part of the adjudicated amount within the time permitted by section 29 of the *Building and Construction Industry Payments Act 2004* (Qld).

APPLICANT'S SIGNATURE

/ /

DATE

Deliver this form to Adjudication Registrar:

In Person - QBCC, 299 Montague Road, West End Qld 4101 Post - GPO Box 5099 Brisbane Qld 4001 Fax - 07 3247 5762.