

Fire Systems Certification Application Form

Transitional Accreditation (Experienced pathway)

Application Process

Important Note:

Please read the Fire Systems Certification Transitional Accreditation FACT SHEET available on: www.fpa.com.au/fpas/fact-sheets.aspx before completing this application form.

What you need to do to complete this form:

- | | |
|---|-----------|
| A. Provide us with your details and that of your employer. | 2 |
| B. Confirm what 'Fire Systems Certification' category(s) you are applying for and in which State or Territory (jurisdiction). | 3 |
| C. Confirm the relevant experience you have in the category you are applying for. | 4 |
| D. Sign the Statutory Declaration relating to the projects you have submitted. | 11 |
| E. Attach a certified copy of any qualification(s) (or current trade registration/licence/certificate) and statement(s) of attainment you hold. | 12 |
| F. Attach a passport size photograph of yourself. | 13 |
| G. Confirm insurance compliance and provide Certificates of Currency. | 13 |
| H. Read FPA Australia's Code of Professional Conduct for Accredited Individuals. | 14 |
| I. Sign the applicant declaration form and have it witnessed. | 15 |
| J. Have your employer sign the employer's declaration. | 16 |
| K. Provide payment details for the application fee. | 18 |
| Check List | 19 |



FPA Australia Fire Protection Accreditation Scheme (FPAS)



A. Applicant Details

Personal and Employer details are mandatory, so all fields need to be completed.

Personal details are required as you may change employer in the future and accreditation is only provided to individuals.

Personal details:

Surname:		Given names:	
Title:		Date of birth:	
Residential street address:			
Suburb:		State:	Postcode:
Postal Address:	Write 'as above' if same a residential address		
Suburb:		State:	Postcode:
Home phone number:		Work phone number:	
Mobile:		Email:	Home: Work:

Employer Details:

Employer's Company Name:			
Street:			
Suburb:		State:	Postcode:
Employer's phone number:			
Is your employer a Recognised Business under FPAS?			
<input type="checkbox"/>	Yes	Please provide the business recognition number:	
<input type="checkbox"/>	No		

Note: Please inform the FPAS team if you change your place of employment, as this may affect your accreditation.



B. 'Fire Systems Certification' Categories

Please indicate the category(s) and State(s) or Territory (s) you seek Transitional Accreditation in by ticking the appropriate box(es).

Please tick: ✓

	'Fire Systems 'Certification' Category	✓	State(s) or Territory(s) (Jurisdictions.)		
			Accreditation is only available in NSW and VIC at the moment. Other jurisdictions are expected to be available in the future.		
1	Fire sprinkler systems		<input type="checkbox"/> NSW	<input type="checkbox"/> VIC	
			NT	SA	ACT
			QLD	WA	TAS

2	Fire hydrant and hose reel systems		<input type="checkbox"/> NSW	<input type="checkbox"/> VIC	
			NT	SA	ACT
			QLD	WA	TAS

3	Fire detection and alarm systems		<input type="checkbox"/> NSW	<input type="checkbox"/> VIC	
			NT	SA	ACT
			QLD	WA	TAS

Please note that:

- Your initial application relates to the State / Territory you live in, so you need to apply for multiple jurisdictions if undertaking fire protection systems certification work in other States and Territories.
- Accreditation is only valid for the fire protection systems certification work you undertake in the jurisdictions you have been accredited in.

Some jurisdictions require additional occupational licencing / accreditation for 'fire systems certification' and 'sign off' work so you need to check with the relevant jurisdictions.

Disclaimer

Accreditation under the Fire Protection Accreditation Scheme is not a substitute for any requirements for licensing, registration or accreditation established by relevant applicable legislation (state, territory and/or federal) unless otherwise confirmed by relevant legislation.



C. Relevant Experience

You must provide details of a minimum of four (4) years relevant work experience in fire systems certification activities and the work has to have occurred within the last ten (10) years. If you are applying for more than one (1) category, you need to provide equal details of the experience for every category you wish to apply for.

Relevant experience and supporting documentation

You must provide both:

1. **A copy of your current Resume**



Provide details of your work history and practical experience relevant to the category of accreditation you are applying for by attaching a copy of your Resume that includes details of each employer, business name, period of employment, your position/title and your employer's contact details for verification.

2. **Certificates or Reports for seven (7) projects for specific building types and uses**

In order to demonstrate your fire systems certification work experience, you need to provide Certificates or Reports for a minimum of seven (7) projects where you have certified the fire protection system.

The Certificates or Reports should cover the following diverse range of medium to large size buildings of varying classifications and uses (and where applicable across multiple jurisdictions) for each category being applied for:

- aged care
- office
- residential
- hospital
- warehouse
- place of assembly
- shopping centre.

For the categories Fire Sprinkler Systems and Fire Hydrant & Hose Reel Systems, two (2) of the seven (7) required projects must be **buildings greater than 25 m in effective height**.

Remember, these projects must have been undertaken within the last ten (10) years.

Where you may not have signed the Certificates or Reports, however you provided all certification work and expertise for another person to sign it, you must provide seven (7) project summaries in the tables on page 6-9 where you have certified, or contributed to the certification, of a fire protection system.

Note:

- If you are applying for more than one (1) category, print or photocopy additional tables for project summaries.
- If you require more space for inputting information, a word version of the tables have been provided on the FPA Australia website at www.fpaa.com.au/fpas

Insufficient information is likely to lead to a delay in assessing your application and may lead to the application being deemed unsuccessful.



EXAMPLE OF A COMPLETED PROJECT SUMMARY

Here is an example of the information required to be provided in a project summary.

Place a tick ✓ in the boxes.

Project **Relevant category(s):** Fire sprinklers Fire Hydrant & Hose Reels Fire Detection & Alarms

Year:	2010	\$ Value:	App \$2.5 m	Project/Address:	25 Smiths Lane, Paddington 2021.
State:	NSW	Employer/Client: Extended Fire Services Pty Ltd			
Type:	<input checked="" type="checkbox"/>	New Building / Works			
	<input type="checkbox"/>	Extension to Existing Building			
	<input type="checkbox"/>	Refurbishment / Fitout / Alteration to Existing Building			
Use:	<input type="checkbox"/>	Aged Care	<input type="checkbox"/>	Assembly	
	<input type="checkbox"/>	Office	<input type="checkbox"/>	Warehouse / Factory / Manufacturing	
	<input checked="" type="checkbox"/>	Residential Multi-storey	<input type="checkbox"/>	Shopping Centre / Retail	
	<input type="checkbox"/>	Hospital	<input type="checkbox"/>	Other: specify	
Height/Storey/Area	<input type="checkbox"/>	≤ 4 storeys	<input type="checkbox"/>	≤ 2000 m ²	
	<input type="checkbox"/>	≤25 m in effective height	<input type="checkbox"/>	> 2000 m ² to ≤ 5000 m ²	
	<input checked="" type="checkbox"/>	> 25 m in effective height	<input checked="" type="checkbox"/>	> 5000m ²	
Role/Responsibility:	Sprinkler system certifier.				
Extent of Work:	Inspection and certification of sprinkler system to all building levels.				
Name of manager, supervisor or referee who can verify the work you performed:	John Citizen			Contact No:	0400 007 007



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PROJECT SUMMARIES

Project 1 Relevant category(s): Fire sprinklers Fire Hydrant & Hose Reels Fire Detection & Alarms

Year:		\$ Value:		Employer/Client:	
State:		Project Name/Address:			
Type:		New Building / Works		Extension to Existing Building	
		Refurbishment / Fitout / Alteration to Existing Building / Redevelopment			
Use:		Aged Care		Place of Assembly	
		Office		Warehouse / Factory / Manufacturing	
		Residential Multi-storey		Shopping Centre / Retail	
		Hospital		Other: specify	
Height/Storey/Area		≤ 4 storeys		≤ 2000 m ²	
		≤ 25 m in effective height		> 2000 m ² to ≤ 5000 m ²	
		> 25 m in effective height		> 5000m ²	
Role/Responsibility:					
Extent of Work:					
Name of manager, supervisor or referee who can verify the work you performed:				Contact No:	

Project 2 Relevant category(s): Fire sprinklers Fire Hydrant & Hose Reels Fire Detection & Alarms

Year:		\$ Value:		Employer/Client:	
State:		Project Name/Address:			
Type:		New Building / Works		Extension to Existing Building	
		Refurbishment / Fitout / Alteration to Existing Building / Redevelopment			
Use:		Aged Care		Place of Assembly	
		Office		Warehouse / Factory / Manufacturing	
		Residential Multi-storey		Shopping Centre / Retail	
		Hospital		Other: specify	
Height/Storey/Area		≤ 4 storeys		≤ 2000 m ²	
		≤ 25 m in effective height		> 2000 m ² to ≤ 5000 m ²	
		> 25 m in effective height		> 5000m ²	
Role/Responsibility:					
Extent of Work:					
Name of manager, supervisor or referee who can verify the work you performed:				Contact No:	

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Project 3 Relevant category(s): Fire sprinklers Fire Hydrant & Hose Reels Fire Detection & Alarms

Year:		\$ Value:		Employer/Client:	
State:		Project Name/Address:			
Type:		New Building / Works		Extension to Existing Building	
		Refurbishment / Fitout / Alteration to Existing Building / Redevelopment			
Use:		Aged Care		Place of Assembly	
		Office		Warehouse / Factory / Manufacturing	
		Residential Multi-storey		Shopping Centre / Retail	
		Hospital		Other: specify	
Height/Storey/Area		≤ 4 storeys		≤ 2000 m ²	
		≤ 25 m in effective height		> 2000 m ² to ≤ 5000 m ²	
		> 25 m in effective height		> 5000m ²	
Role/Responsibility:					
Extent of Work:					
Name of manager, supervisor or referee who can verify the work you performed:			Contact No:		

Project 4 Relevant category(s): Fire sprinklers Fire Hydrant & Hose Reels Fire Detection & Alarms

Year:		\$ Value:		Employer/Client:	
State:		Project Name/Address:			
Type:		New Building / Works		Extension to Existing Building	
		Refurbishment / Fitout / Alteration to Existing Building / Redevelopment			
Use:		Aged Care		Place of Assembly	
		Office		Warehouse / Factory / Manufacturing	
		Residential Multi-storey		Shopping Centre / Retail	
		Hospital		Other: specify	
Height/Storey/Area		≤ 4 storeys		≤ 2000 m ²	
		≤ 25 m in effective height		> 2000 m ² to ≤ 5000 m ²	
		> 25 m in effective height		> 5000m ²	
Role/Responsibility:					
Extent of Work:					
Name of manager, supervisor or referee who can verify the work you performed:			Contact No:		

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Project 5 Relevant category(s): Fire sprinklers Fire Hydrant & Hose Reels Fire Detection & Alarms

Year:		\$ Value:		Employer/Client:	
State:		Project Name/Address:			
Type:		New Building / Works		Extension to Existing Building	
		Refurbishment / Fitout / Alteration to Existing Building / Redevelopment			
Use:		Aged Care		Place of Assembly	
		Office		Warehouse / Factory / Manufacturing	
		Residential Multi-storey		Shopping Centre / Retail	
		Hospital		Other: specify	
Height/Storey/Area		≤ 4 storeys		≤ 2000 m ²	
		≤ 25 m in effective height		> 2000 m ² to ≤ 5000 m ²	
		> 25 m in effective height		> 5000m ²	
Role/Responsibility:					
Extent of Work:					
Name of manager, supervisor or referee who can verify the work you performed:					Contact No:

Project 6 Relevant category(s): Fire sprinklers Fire Hydrant & Hose Reels Fire Detection & Alarms

Year:		\$ Value:		Employer/Client:	
State:		Project Name/Address:			
Type:		New Building / Works		Extension to Existing Building	
		Refurbishment / Fitout / Alteration to Existing Building / Redevelopment			
Use:		Aged Care		Place of Assembly	
		Office		Warehouse / Factory / Manufacturing	
		Residential Multi-storey		Shopping Centre / Retail	
		Hospital		Other: specify	
Height/Storey/Area		≤ 4 storeys		≤ 2000 m ²	
		≤ 25 m in effective height		> 2000 m ² to ≤ 5000 m ²	
		> 25 m in effective height		> 5000m ²	
Role/Responsibility:					
Extent of Work:					
Name of manager, supervisor or referee who can verify the work you performed:					Contact No:

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Project 7 Relevant category(s): Fire sprinklers Fire Hydrant & Hose Reels Fire Detection & Alarms

Year:		\$ Value:		Employer/Client:	
State:		Project Name/Address:			
Type:		New Building / Works		Extension to Existing Building	
		Refurbishment / Fitout / Alteration to Existing Building / Redevelopment			
Use:		Aged Care		Place of Assembly	
		Office		Warehouse / Factory / Manufacturing	
		Residential Multi-storey		Shopping Centre / Retail	
		Hospital		Other: specify	
Height/Storey/Area		≤ 4 storeys		≤ 2000 m ²	
		≤ 25 m in effective height		> 2000 m ² to ≤ 5000 m ²	
		> 25 m in effective height		> 5000m ²	
Role/Responsibility:					
Extent of Work:					
Name of manager, supervisor or referee who can verify the work you performed:			Contact No:		

Additional Projects

You may include other relevant projects in support of your application (in addition to those required) in the following tables.

Furthermore, if the project summaries you have submitted:

- do not cover all the required building types, uses and jurisdictions or
- were not undertaken within the last ten (10) years

you can provide details of other relevant projects that you deem necessary to support your application.

Print or photocopy as many project tables, as you require.

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Project ____ Relevant category(s): Fire sprinklers Fire Hydrant & Hose Reels Fire Detection & Alarms

Year:		\$ Value:		Employer/Client:	
State:		Project Name/Address:			
Type:		New Building / Works		Extension to Existing Building	
		Refurbishment / Fitout / Alteration to Existing Building / Redevelopment			
Use:		Aged Care		Place of Assembly	
		Office		Warehouse / Factory / Manufacturing	
		Residential Multi-storey		Shopping Centre / Retail	
		Hospital		Other: specify	
Height/Storey/Area		≤ 4 storeys		≤ 2000 m ²	
		≤ 25 m in effective height		> 2000 m ² to ≤ 5000 m ²	
		> 25 m in effective height		> 5000m ²	
Role/Responsibility:					
Extent of Work:					
Name of manager, supervisor or referee who can verify the work you performed:				Contact No:	

Project ____ Relevant category(s): Fire sprinklers Fire Hydrant & Hose Reels Fire Detection & Alarms

Year:		\$ Value:		Employer/Client:	
State:		Project Name/Address:			
Type:		New Building / Works		Extension to Existing Building	
		Refurbishment / Fitout / Alteration to Existing Building / Redevelopment			
Use:		Aged Care		Place of Assembly	
		Office		Warehouse / Factory / Manufacturing	
		Residential Multi-storey		Shopping Centre / Retail	
		Hospital		Other: specify	
Height/Storey/Area		≤ 4 storeys		≤ 2000 m ²	
		≤ 25 m in effective height		> 2000 m ² to ≤ 5000 m ²	
		> 25 m in effective height		> 5000m ²	
Role/Responsibility:					
Extent of Work:					
Name of manager, supervisor or referee who can verify the work you performed:				Contact No:	



D. Statutory Declaration

You must sign this Statutory Declaration as part of your application to declare that the fire protection systems in the projects you have submitted have all been certified by yourself or that you have contributed to the certification work and expertise.

Complete this section in the presence of a person who is authorised to witness a statutory declaration in your State or Territory. (See FACT SHEET for details).

Declaration

I,

_____ Full name of applicant

of

_____ Full residential address of applicant

declare that the fire protection systems in the projects that I have provided in support of my application for Fire Systems Certification Accreditation have all been certified by me (or I have contributed to the certification work and expertise for the fire protection system).

I acknowledge that this declaration is true and correct and I make it in the belief that a person making a false declaration is liable to the penalties of perjury.

Signed

_____ Signature of applicant

Declared at

in the state of

_____ Suburb in which declaration was signed State in which declaration was signed

this

day of

20

_____ Day of the month Month Year

Before me * (Witness details)

Name, address and signature of witness.

A witness must be a person authorised under your relevant State or Territory Act to witness the signing of a statutory declaration.

State or Territory Acts require a person who witnesses a declaration to legibly write, type or stamp his or her name and address below his or her own signature.





E. Qualifications (if attained)

Qualification(s) or vocational trade

Please tick and list in the table below any qualification(s) or statements of attainment you have completed that you consider relevant to fire systems certification category of accreditation you are applying for:

- Qualification(s) or vocational trade (as evidenced by a current Occupational Registration, Occupational Licence or Trade Craftsmen/Apprenticeship Certificate).

- Statement(s) of attainment.

Note: Qualifications are not required for Transitional Accreditation.

Code no.	Title

Photocopy the table and attach to your application if you require additional space.



Please provide certified copies of any qualifications, licences etc and statements of attainment as listed in the above table.

See Section 10 of the FACT SHEET for details on 'How to certify a copy of a document'.



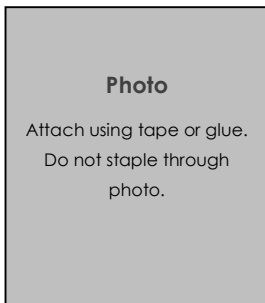


F. Colour Passport Photograph



Please attach a current colour passport-size photograph (minimum size of 4 cm high x 3.5 cm wide) printed on photographic paper in the box provided.

Alternatively, you can supply a digital image in .jpg or .tif format to fpas@fpaa.com.au as per the requirements of passport photographs eg the photograph should be no more than six months old; be a close up of your head and top of shoulders; and be taken with a white or pale background.



This is a true photograph / digital image of the applicant as witnessed by:

Full Name of Witness: (Print) _____

Signature: _____ Date: ____ / ____ / ____

Contact no: _____

G. Insurance Compliance

Insurance compliance

Indicate below how you meet the insurance requirements for the Fire Systems Certification Accreditation category under FPAS:

I, as a sole trader personally hold the required level of insurance (insurance is in my name or trading name)

OR

My insurance cover is provided by the business entity that employs or engages me as an accredited individual (listed as the company name in Section A of this application).





Please provide evidence of your (or your employers) insurance cover by attaching Certificates of Currency from your insurance provider for the minimum insurance requirement of:

- \$10 million for Public & Products Liability **and**
- \$2 million for Professional Indemnity.

You must ensure that your Professional Indemnity insurance, explicitly covers all activities for which you are applying for accreditation.

You (or the company you are employed by) can do this by checking with your insurance advisor, that your insurance policy covers all work activities in relation to the category of accreditation you are applying for.

The Certificate(s) of Currency must include in the list of business activities, a statement applicable to the category of accreditation you are applying for. For example:

'Provision of fire systems certification activities as prescribed in FPA Australia's Fire Protection Accreditation Scheme in the Fire Systems Certification Accreditation FACT SHEET for the following category(s):

- **Fire Sprinkler Systems**
- **Fire Hydrant and Hose Reel Systems**
- **Fire Detection and Alarm Systems.'**

H. Read the Code of Professional Conduct

Fire Protection Association Australia's Code of Professional Conduct (the Code) prescribes the principles, standards of behaviour and service delivery requirements expected of accredited individuals under FPAS.

As part of this application you must complete the Code of Professional Conduct declaration on the next page, stating that you have read and will abide by the requirements of the Code and accept any decision if it is determined you have breached the Code.

The Code is located at www.fpa.com.au/fpas/copc.

Make sure you have read the Code before you complete the applicant declaration on the following page.



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I. Applicant Declaration

In support of my application:

Please tick: ✓

- I advise that I have attained relevant experience required for each category applied for.
- I declare that the information contained in this application is true and correct in every particular.
- I acknowledge that FPA Australia may contact any person or other entity, to verify information provided in this application.
- I support and agree to comply with the principles, requirements and specified conditions of FPAS as outlined in the Fire Systems Certification FACT SHEET and the Fire Systems Certification Application Form and acknowledge that from time to time additional changes to accreditation requirements may occur.
- I understand that there will be a requirement to transition to Qualified Accreditation within four (4) years, once the Qualified pathway is available.
- I commit to conduct Fire Systems Certification activities in accordance with the relevant Legislation, Codes and Standards.
- I have read and meet the relevant experience requirements and accept the definition covering the scope of activities for fire systems certification in the Fire Systems Certification Accreditation FACT SHEET.
- I confirm that I (or my employer) hold and will maintain the minimum insurance requirement of \$10 million for Public & Products Liability and \$2 million for Professional Indemnity Insurance and that the level of insurance cover is adequate for the services and activities I undertake in the fire protection industry.
- I have read and agree to abide by FPA Australia's Code of Professional Conduct which prescribes the principles, standards of behaviour, and service delivery requirements expected of accredited individuals under FPAS.
- I acknowledge and understand that I must attend a mandatory information session and satisfactorily complete the assessment in order to be granted accreditation.
- I commit to maintain skills by completing the required CPD in accordance with Fire Systems Certification Accreditation FACT SHEET.
- I will keep all records relating to my fire systems certification work activities for a minimum of 10 years.
- I declare that I am not currently suspended, or revoked from any other competent fire systems certification practitioner accreditation or licensing scheme (In the last five years).

Signature of Applicant: _____

Date: ____ / ____ / ____

Witness Details:

Signature of Witness: _____

Date: ____ / ____ / ____

Name: (Print) _____

Street: _____

Suburb: _____

State: _____

Postcode: _____

Contact no: _____



Disclaimer

Accreditation under the Fire Protection Accreditation Scheme is not a substitute for any requirements for licensing, registration or accreditation established by relevant applicable legislation (state, territory and/or federal) unless otherwise confirmed by relevant legislation.

J. Employer Declaration

Your employer needs to sign this declaration stating that you are an employee of the company listed in Section A of this application form. If your employer is not a Director of the Company that employs you, please ensure that a Director (or Director's representative) of the company signs this declaration.

Company Name: _____

Director's Name: _____

Must be a Director (or Director's representative) of the above Company

Title: _____

Company ABN or ACN: _____

I declare that:

Full name of applicant

is the person making the application for fire systems certification accreditation under FPAS, and is an employee of the aforementioned company.

Signature of Director: _____ Date: ____ / ____ / ____



K. Fees and Payment details

The following fees apply to individual accreditation:

Once-off fees apply at initial application and are non-refundable.

Application Fee (Once-off)	\$660 Includes: <ul style="list-style-type: none">• GST• one category• one jurisdiction• a half-day information session• one written assessment.
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Additional Category Fee (Once-off)	\$150 per category Includes: <ul style="list-style-type: none">• GST• one category• one written assessment.
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Additional Jurisdiction Fee (Once-off and capped at \$400)	\$100 per jurisdiction Includes: <ul style="list-style-type: none">• GST• all categories.
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Annual Accreditation Fee	\$660
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Note: This payment is not due until you have attended the half-day information session and satisfactorily completed a written assessment(s).

- Includes:
- GST
 - all categories
 - all jurisdictions
 - one (1) year accreditation fee.

Other fees:

Re-assessment Fee	\$220 Includes GST, all categories and jurisdictions; and relates to a second written assessment.
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Re-application Fee	\$330	Note: This reduced fee only applies if a subsequent application is submitted within 12 months of the unsuccessful notification date.
	Includes: <ul style="list-style-type: none">• GST• one category• one jurisdiction• one written assessment.	

Note: Additional category and jurisdiction fees as per standard application.

Appeal Fee	\$220 Includes GST, all categories and jurisdictions; and is non-refundable.
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Status change	\$44 Includes additional category(s) and transition to Qualified Accreditation.
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Payment

Method of payment: Cheque payable to **Fire Protection Association Australia**. ABN 30 005 366 576

EFT payment: FPA Australia BSB: 033 083 Account No: 33-2932

Note: Please advise reference number, name, payment time, date and amount to: accounts@fpaa.com.au

Credit card: VISA MasterCard AMEX

Card Number: _____

Name on Card: _____

Expiry Date: ____ / ____

Signature: _____ Amount: _____

A tax invoice will be mailed to you with your FPAS Accreditation kit.

Once you have completed your application form, send it along with your payment and any certified documents to:

General Manager - Member & Industry Services.
Fire Protection Association Australia
PO Box 1049
Box Hill
Victoria 3128

OR

Scan your completed Application form and email it together with your photo (.jpg or .tif) to fpas@fpaa.com.au

Note: In order to keep your file size to a minimum, you should scan your application form in black and white (apart from your digital photo that must be in colour).

Enquiries

If you have any questions or enquiries please contact Accreditation and Licensing on fpas@fpaa.com.au or 03 8892 3131.

For additional resources: www.fpaa.com.au/fpas

Privacy Policy

FPA Australia respects the privacy and personal information of its members. Personal and business information is collected by the Association for the primary purpose of providing services to members and maintaining the membership and accreditation registers. FPA Australia aims to manage and protect personal information in accordance with national privacy guidelines recommended pursuant to the Privacy Act 1988 (Cth) or the most current version of this act, and the Australian Privacy Principles. The Association's Privacy Statement can be viewed online at www.fpaa.com.au/about/privacy-policy.



Your Check List

To ensure that your application is complete for processing, please use this Check List to confirm you have provided all of the necessary information. If we do not receive all the information listed below, we will not be able to process your application.

1. **Applicant Details** Yes
Have you fully completed the Applicant Details section?
2. **'Fire Systems Certification' Categories** Yes
Have you identified the 'Fire Systems Certification' category(s) and jurisdiction(s) you wish to apply for?
3. **Relevant Experience** Yes
Have you provided the necessary information regarding your relevant experience in each category you have applied for?
4. **Statutory Declaration** Yes
Have you signed the Statutory Declaration relating to the Certificates or Reports (or project summaries) you have submitted as part of your application?
5. **Proof of Qualification** Yes
Have you attached a copy of any qualification(s) (or trade registration/licence/certificate) and statement(s) of attainment that you have attained relevant to the category you are applying for? Have the originals been certified by an authorised person?
6. **Photograph** Yes
Have you attached a current passport-size colour photograph?
Has your photograph been witnessed?
7. **Insurance Compliance** Yes
Have you confirmed that you hold appropriate insurance and attached a copy of the applicable Certificate(s) of Currency?
8. **Code of Professional Conduct** Yes
Have you read the Code of Professional Conduct?
9. **Declaration, Signature & Witness Details** Yes
Has your signature in the Applicant Declaration section been witnessed?
Have you ticked all declaration items?
10. **Employer's Declaration** Yes
Has your employer signed the employer's declaration?
11. **Payment** Yes
Have you completed the payment section?