

Form 2

**Application for a Licence to Undertake
Cadastral Surveys**



**Cadastral Surveyors Licensing Board
of New Zealand**

**For applicants whose licence has expired
For Year 1 July 2018 – 30 June 2019**

In terms of Part 3 of the Cadastral Survey Act 2002

I,,

(Full name; please print)

hereby apply for a Licence to Undertake Cadastral Surveys.

Contact Address:

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Phone No: Fax: Mobile:

Email:

Previous Licence or Registration No: Date issued:

Also to be enclosed with the application:

- 1) A brief CV of your cadastral surveying experience during the last 3 years (this should detail plan numbers and the size of survey rather than just survey duties or firms worked for).
- 2) The names and contact details of two referees of your cadastral surveying experience, one of whom must hold a current cadastral licence and be able to attest to your recent cadastral surveying competence.
- 3) Licence fee of \$220 incl GST (\$191.30 plus \$28.70 GST). (Note: The Board will reduce this fee to \$115.00 incl GST if the licence is issued after 1 January 2019, for the balance of the year to 30 June 2019).

Cheque or Direct Credit to 02 0536 0017716 00, if direct crediting include your name.

Please answer the following questions for the Board's reporting and statistical purposes.

Date of Birth: ___/___/____, Gender: Male Female

Ethnic Group, please tick only one box: New Zealander Maori Pacific Islander

Other Please specify _____

Declaration:

- I confirm that I have read the Board's Standards for Licensing dated April 2013, (See www.cslb.org.nz Standards for Licensing) and meet all the competencies outlined therein.
- In terms of section 23 of the Cadastral Survey Act 2002, I hereby certify that within the last 5 years I have not been convicted of any offence under sections 217 to 281 of the Crimes Act 1961.

Signature: Date / /

CSLB Form 2

Address: P O Box 12 241, Wellington 6144, Ph 04 473 2020 Fax 04 474 8933

July 2018

email secretary@cslb.org.nz

Referees

1

Name:.....

Licensed Surveyor Yes No

Address:.....

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Phone:....., Mobile:.....

Email:.....

2

Name:.....

Licensed Surveyor Yes No

Address:.....

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Phone:....., Mobile:.....

Email:.....

Send this form, together with the required fees and documents to:
The Secretary, Cadastral Surveyors Licensing Board P O Box 12 241 WELLINGTON 6144
Or email secretary@cslb.org.nz