



NEW BRUNSWICK BUILDING OFFICIALS ASSOCIATION, INC.  
P.O. BOX 3193, STATION B, FREDERICTON, N.B. E3A 5G9  
[www.nbboa.ca](http://www.nbboa.ca)

## APPLICATION FOR CERTIFICATION/RE-CERTIFICATION

Please read through the Association's by-laws and information package or visit our website to determine if you are eligible for certification/qualification.

### INSTRUCTIONS TO APPLICANTS:

1. Applicants must be members in good standing with the New Brunswick Building Officials Association and all current applicable registration fees are paid.
2. Applications must be complete. Only applications that are completed properly will be reviewed.
3. The Certification Committee shall consider all applications objectively and will advise the applicant of their decision after reviewing a complete application. Any applicant denied Certification has a right of appeal to the Executive Committee of the Association, whose decision shall be final.
4. The personal information contained in this application shall be used only for the determination of Certification qualification.
5. Copies of pertinent certificates must be received and a letter from your employer confirming your employment and experience is also required. (See sample letter in package).
6. To maintain certification, the applicant must continue to be a member in good standing with dues paid on an annual basis.

### **Forward the required documents to:**

New Brunswick Building Officials Association  
**Attention: Certification Committee Chairperson**  
P.O. Box 3193, Station B  
Fredericton, N.B.  
E3A 5G9



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## APPLICATION FOR CERTIFICATION PROCEDURE

### **DEFINITIONS:**

**Work Experience:** Is generally determined to be someone who is employed by a Municipality, Planning Commission or the Province who develops, administers, applies, interprets and/or enforces the National Building Code or building code related statutes.

The following positions may be examples of an individual with the necessary work experience needed to obtain certification under the requirements of the NBBOA:

- Plans Examiner
- Building Inspector (employed by either the Province, a Municipality or Planning Commission).
- Building Clerk (Subject to a job description attached to application).
- Permit Coordinator/Permit Information Officer
- By-law Enforcement - enforcing building and zoning regulations

**A position not listed above may be considered provided that the applicant provides an official “job description” to the Certification Committee.**

**NOTE:** An applicant shall submit a copy of their job description to the Certification Committee for review and approval if there is some doubt that the applicant does not fit into the definition of **Work Experience**. Verification letters signed by a supervisor are required to be submitted as part of the application.

**Please fill out all relevant information and applicable fields in the following form. If the information and required attached documents are not completed as stated in the instructions and procedures, then your application will not be reviewed until such time as the application is complete.**

**Read carefully,** and if you have any questions in completing your application, please contact your zone representative. If you are not sure who your zone representative is, please log on to our website at [www.nbboa.ca](http://www.nbboa.ca) and look under “*Executive Committee*” to determine who your representative will be.

**SAMPLE EMPLOYMENT VERIFICATION LETTER (TO BE ON OFFICIAL LETTERHEAD)**

Date:

Employer (*ie: municipality, province, planning commission, etc.*)

Department (*if necessary*)

Mailing Address

Postal Code

**TO THE CERTIFICATION COMMITTEE OF THE NB BUILDING OFFICIALS ASSOCIATION:**

**This Letter is to confirm that <name of the employee/applicant> has been employed with the <name of the employer> for < # of years>since<actual start date of present employment>.**

*Signature*

Printed Name

Title (must be a Clerk-Administrator, Director, or Human Resources/Personnel Manager)



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**APPLICATION FOR CERTIFICATION / RE-CERTIFICATION**

**APPLICANT INFORMATION:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Initial: \_\_\_\_\_

Home Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Please check appropriate box (*only 1 box should be marked*) below:

**I would like to make application for:**  Certification  Re-Certification  Qualification

If re-certification, have you accumulated the required maintenance/learning credits?  
 (*Please attach all applicable annual record forms <Form D> to your application.*)

Yes  No  Unsure

**CURRENT EMPLOYMENT:**

Current Employer: \_\_\_\_\_

Business Address: \_\_\_\_\_  
 \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

Name of Position Held: \_\_\_\_\_ **\*Please attach a job description**

Supervisor's Name: \_\_\_\_\_ Supervisor's Job Title: \_\_\_\_\_

Supervisor's Phone: \_\_\_\_\_ Supervisor's Fax: \_\_\_\_\_

Length of employment with current employer: \_\_\_\_\_

**Supervisor's Signature:** \_\_\_\_\_ **(must be signed for review).**



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**PREVIOUS WORK EMPLOYMENT:**

*(This must be relevant to the work experience defined in the instructions on the front page of this application).*

Name of Employer: \_\_\_\_\_

Business Address: \_\_\_\_\_  
\_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

Name of Position Held: \_\_\_\_\_

Length of employment: \_\_\_\_\_ Supervisor Signature: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Business Address: \_\_\_\_\_  
\_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

Name of Position Held: \_\_\_\_\_

Length of employment: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Business Address: \_\_\_\_\_  
\_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

Name of Position Held: \_\_\_\_\_

Length of employment: \_\_\_\_\_



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If you have checked the box for **qualification** above, please check the courses that you have successfully completed.

**BUILDING CODE QUALIFIED OFFICIAL – LEVEL I**

Part 9: The House	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Legal Processes & Responsibilities	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**BUILDING CODE QUALIFIED OFFICIAL – LEVEL II**

Part 9: The House	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Legal Processes & Responsibilities	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Part 9: Technical Requirements-Book 1	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Part 9: Technical Requirements-Book 2	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**BUILDING CODE QUALIFIED OFFICIAL – LEVEL III**

Part 9: The House	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Legal Processes & Responsibilities	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Part 9: Technical Requirements-Book 1	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Part 9: Technical Requirements-Book 2	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Part 3: Classification & Construction	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Part 3: Egress & Exits	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If you have checked the box for **certification** above, please check the courses that you have successfully completed.

**CERTIFIED BUILDING CODE OFFICIAL – LEVEL I**

Part 9: The House	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Legal Processes & Responsibilities	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Two (2) Years of relevant work experience</b>	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>

**CERTIFIED BUILDING CODE OFFICIAL – LEVEL II**

Part 9: The House	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Legal Processes & Responsibilities	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Part 9: Technical Requirements-Book 1	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Part 9: Technical Requirements-Book 2	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Four (4) Years of relevant work experience</b>	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>



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**CERTIFIED BUILDING CODE OFFICIAL – LEVEL III**

- |  |                                     |                                    |
|--|-------------------------------------|------------------------------------|
| Part 9: The House                                | <input type="checkbox"/> Yes        | <input type="checkbox"/> No        |
| Legal Processes & Responsibilities               | <input type="checkbox"/> Yes        | <input type="checkbox"/> No        |
| Part 9: Technical Requirements-Book 1            | <input type="checkbox"/> Yes        | <input type="checkbox"/> No        |
| Part 9: Technical Requirements-Book 2            | <input type="checkbox"/> Yes        | <input type="checkbox"/> No        |
| Part 3: Classification & Construction            | <input type="checkbox"/> Yes        | <input type="checkbox"/> No        |
| Part 3: Egress & Exits                           | <input type="checkbox"/> Yes        | <input type="checkbox"/> No        |
| <b>Six (6) Years of relevant work experience</b> | <input type="checkbox"/> <b>Yes</b> | <input type="checkbox"/> <b>No</b> |

**EDUCATION:**

**Post secondary:**

School or Institution	Years Attended	Name of Degree or Diploma Received

**Other Education (please specify type):**

School or Institution	Years Attended	Name of Degree or Diploma Received

**CONDITIONS OF ACCEPTANCE:**

I, *(please print)* \_\_\_\_\_ hereby submit my application for certification/re-certification and attest that the information contained therein is correct to the best of my knowledge. It is understood and agreed that any misrepresentation made by me in this application may be sufficient cause for cancellation of this application, or if accepted, for dismissal from the Association. I hereby authorize the Certification Committee of the Association to make such inquiries respecting the above information as deemed necessary.

\_\_\_\_\_  
 Signature of Applicant

\_\_\_\_\_  
 Date