

NHBC Application for change of title

PART 1: Business details

Please confirm your current details.

Please confirm your proposed trading status.

If you are a sole trader, please complete the following section.

We do not accept P.O. Box or 'Care of' addresses.

Details required:

Name of firm/company,
NHBC reg. number, position held.

Please confirm the name and address of your partnership or company.

We do not accept P.O. Box or 'Care of' addresses.

Existing NHBC details

Name that currently appears on the register:

NHBC registration number:

New business type

Sole trader Partnership Private limited company Public limited company

Other - please specify:

How long has the applicant's business been in existence? years

For limited companies, please provide your Companies House Number:

Please tick if this company has been set up for one specific project.

Sole trader details

Your full name: Date of birth:

Trading name:

Your address:

Postcode: Email address:

Telephone number: Mobile number:

If you have been living at the above property for less than five years, please provide your previous address/addresses:

If you are/were associated with any firm/company currently or previously registered with NHBC, please provide details:

Have you ever been declared bankrupt? Yes No

If yes, have you been discharged? Yes No

PLEASE PROCEED TO PART 2: 'Associations and grouping'

Partnership/company details

Partnership/company name:

Address:

Postcode: Email address:

Telephone number: Mobile number:



PART 1:

Business details continued

Sole traders need not complete this section.

Please provide the names and private addresses of all partners or directors for your firm/company.

Details required:

Name of firm/company,
NHBC reg. number, position held.

Partners/directors/shareholders information

1. Full name: [text box] Date of birth: [text box]

Partner Director Shareholder

Address: [text box]

[text box]

Postcode: [text box] Email address: [text box]

Telephone number: [text box] Mobile number: [text box]

If this person has been living at the above property for less than five years, please provide their previous address/addresses: [text box]

[text box]

If this person is/was associated with any firm/company currently or previously registered with NHBC, please provide details: [text box]

[text box]

Has this person ever been declared bankrupt? Yes No

If yes, has this person been discharged? Yes No

2. Full name: [text box] Date of birth: [text box]

Partner Director Shareholder

Address: [text box]

[text box]

Postcode: [text box] Email address: [text box]

Telephone number: [text box] Mobile number: [text box]

If this person has been living at the above property for less than five years, please provide their previous address/addresses: [text box]

[text box]

If this person is/was associated with any firm/company currently or previously registered with NHBC, please provide details: [text box]

[text box]

Has this person ever been declared bankrupt? Yes No

If yes, has this person been discharged? Yes No

3. Full name: [text box] Date of birth: [text box]

Partner Director Shareholder

Address: [text box]

[text box]

Postcode: [text box] Email address: [text box]

Telephone number: [text box] Mobile number: [text box]

If this person has been living at the above property for less than five years, please provide their previous address/addresses: [text box]

[text box]

If this person is/was associated with any firm/company currently or previously registered with NHBC, please provide details: [text box]

[text box]

Has this person ever been declared bankrupt? Yes No

If yes, has this person been discharged? Yes No

Details required:

Name of firm/company,
NHBC reg. number, position held.

4. Full name: [] Date of birth: []

Partner Director Shareholder

Address: []

[]

Postcode: [] Email address: []

Telephone number: [] Mobile number: []

If this person has been living at the above property for less than five years, please provide their previous address/addresses: []

[]

If this person is/was associated with any firm/company currently or previously registered with NHBC, please provide details: []

[]

Has this person ever been declared bankrupt? Yes No

If yes, has this person been discharged? Yes No

Details required:

Name of firm/company,
NHBC reg. number, position held.

If you need more space, continue onto a blank sheet and attach.

PART 2: Associations and grouping

If you have a company already registered with us, or that acts as your parent, please provide details here.

Grouping refers to the NHBC Premium Rating Scheme - by grouping together with a currently registered associate company, you could achieve the same rating. For full details of grouping and our Premium Rating Scheme, please visit our website www.nhbc.co.uk.

Associations

Is there an ultimate holding company in relation to this application? Yes No

If yes, please provide their details:

Company name: []

Company address: []

[]

Company number: [] NHBC number (if applicable): []

Groupings

Are you already grouped with an associate/subsidiary company currently registered with NHBC? Yes No

If no, do you wish to be grouped with an associate/subsidiary company currently registered with NHBC? Yes No

If yes, please provide their name and/or NHBC number: []

[]

Are you a subsidiary of the company you wish to group with? Yes No

PART 3: Technical details (builder applicants only)

Please complete only if details of the individual in charge of building standards has changed.

Will you be the person in charge of building standards? Yes No

If not, then you MUST provide details of your technical representative below.

Technical representative name: []

Address: []

[]

Postcode: [] Email address: []

Telephone number: [] Mobile number: []

Please provide details of the technical representative's previous construction experience:

[]

[]

If this person is/was associated with any firm/company currently or previously registered with NHBC, please provide details: []

[]

Details required:

Name of firm/company,
NHBC reg. number, position held.

PART 4: Home registration plans

When we are ready to complete your application, the following information will help us to prepare an offer of registration for you.

Home registration plans

In the next 12 months of your registration, how many homes do you propose to register:

On land that you own?

On behalf of Housing Associations?

Which are built to contract for a homeowner to live in?
(only applicable to builders)

In the next 12 months of your registration, how many homes do you propose to build:

On behalf of an NHBC registered developer?
(only applicable to builders)

On behalf of a developer who is not NHBC registered?
(only applicable to builders)

Total value of homes proposed to build and register?

What is the highest selling price expected for any home?

PART 5: Enclosures and declarations

Please ensure that you have enclosed your payment with this form to avoid any delay in processing your application.

For full details of the annual renewals process and fees, please visit our website www.nhbc.co.uk/renewals.

All individuals named in PART 1 need to sign and have their signature witnessed.

Enclosures checklist

Have you enclosed a cheque made payable to NHBC to cover your change of title fee?
 Yes No

Declaration and authorisation

I, as the applicant (if I am a sole trader), or otherwise on behalf of the named applicant:

- hereby apply to have the applicant's name entered in the NHBC register of builders and developers
- confirm that the details I have given are correct
- agree to comply with the NHBC Rules for builders and developers registered with NHBC (as amended from time to time in accordance with their terms), and with any conditions imposed under them by NHBC
- enclose a cheque for £156 + VAT for the change of title fee
- understand that the change of title fee is not returnable, even if the application is not successful
- confirm that NHBC can carry out full credit checks on the signatories below.

Please note that to remain NHBC registered, an annual renewal fee is due in April of each year.

Signature:	<input type="text"/>	Name of signatory:	<input type="text"/>
		Position held:	<input type="text"/>
Witness signature:	<input type="text"/>	Name of witness:	<input type="text"/>
Address of witness:	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode:	<input type="text"/>

Signature:	<input type="text"/>	Name of signatory:	<input type="text"/>
		Position held:	<input type="text"/>
Witness signature:	<input type="text"/>	Name of witness:	<input type="text"/>
Address of witness:	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode:	<input type="text"/>

Signature: Name of signatory:
 Position held:

Witness signature: Name of witness:

Address of witness:
 Postcode:

If you need more space, continue onto a blank sheet and attach.

Signature: Name of signatory:
 Position held:

Witness signature: Name of witness:

Address of witness:
 Postcode:

Please note that this application cannot be processed without a signature from all directors and shareholders and the appropriate fee.

How we use personal information about individuals given on this form

We may share personal information with credit reference agencies and companies for use in credit decisions, fraud prevention, to pursue debtors and to assist us in the administration of warranty and insurance cover issued by NHBC. We may also make periodic searches at credit reference agencies and fraud prevention agencies to manage your account with us.

In the future, we would like to contact individuals for research purposes. If you **do not** wish to be contacted, please tick the box

We would like to keep you informed of our products and services that may be of interest to you, and send you 'Clicks & Mortar', NHBC's online newsletter. If you **do not** wish to be contacted, please tick the box

We would like to share information with other companies so that they may send you free publications and selected offers that they believe may be of interest to you. If you **do not** agree to your information being shared, please tick the box

If you need any help or advice on completing this form, please call **Customer Services Team** on **0344 633 1000**.

Please send the completed form and any accompanying documents, (e.g. plans, drawings) to: **Customer Services Team, NHBC, NHBC House, Davy Avenue, Knowlhill, Milton Keynes, Bucks MK5 8FP.**