

Updated June 2023



Please return completed application form to :
New Brunswick Building Officials Association (NBBOA)
Certification Committee Chair
P.O. Box 30033
Prospect Plaza
Fredericton, NB E3B 0H8 or email to info@nbboa.ca

Qualification & Certification Application

Applicant Information

Name: _____

Employer: _____

Employer Address: _____

Phone Number: _____

Email Address: _____

Applying For

	BCQO Level 1		NBCBO Level 1
	BCQO Level 2		NBCBO Level 2
	BCQO Level 3		NBCBO Level 3

Are you applying for NBCBO Level 2? If yes, are you planning a 2-year mentored program for NBCBO Level 3? If so, who is your NBCBO Level 3 mentor?

Mentor Name

Mentor's Signature

Date

Are you applying for NBCBO Level 3? Please answer the following questions:

What is the date of your NBCBO Level 2? _____

What is the date you passed the first BCQO Level 3 exam after the date above? _____

The two years of NBCBO Level 3 experience does not begin until after:

- (1) your mentor has been approved by the Certification Committee,
- (2) you have received NBCBO Level 2 and
- (3) you have passed the first BCQO Level 3 exam.

The five years of experience does not count until after:

- (1) you have received NBCBO Level 2 and
- (2) you passed your first BCQO Level 3 exam.

Provide a logbook of your inspections for either path. See Logbook format available at

<https://nbboa.ca/certification/certification-program/Internship> Logbook

Course Verification

Exam or course

(Please provide proof of certificates and exams when applying)

Exam Name	Previous Course Equivalent Name	Date Completed
Level 1		
Legal Processes & Responsibilities	Legal Processes and Responsibilities	
Communication Skills for Building Officials	Communication Skills	
Level I – Building Envelope	The House - Building Envelope	
Level I – Health & Safety	The House - Health and Safety	
Level 2		
Level II HVAC & Fire	Part 9 HVAC and Fire Protection	
Level II Structural	Part 9 Structural Requirements	
Part 9 Plans Examination	Part 9 Plans Examination	
Barrier Free Design	Barrier Free Design	
Level 3		
Level III Classification and Construction	Part 3 Building Classification Fire Safety Provisions	
Level III Health and Safety	Part 3 Health and Safety Requirements	
Level III Life Safety Systems	Part 3 Egress and Exits and Fire Safety Provisions	
Level III Fire Protection	Part 3 Life Safety Systems	
Level III Plans Examination	Part 3 Plans Examination Systems	

Miscellaneous Information

	Yes	No
Are you a member in good standing with the Association?		
Have you successfully completed Grade 12?		
If yes, where and the date completed.		
Current Certification held by You and date received?		

Work Experience Verification Form

(Please refer to the NBBOA Qualification Requirements to Determine What Applies to You Below)

General Experience as a Building Official	
How many years have you been appointed to enforce building codes? What is the date of your appointment?	
Level 1 – Inspections and/or Plan Reviews	
How many years have you been performing inspections and/or plan reviews up to two-family dwelling units?	
How many Part 9 “Housing” Inspections and/or Plan Reviews have you performed?	
Level 2 – Inspections and/or Plan Reviews	
How many years have you been performing Part 9 Inspections and/or Plan Reviews (not including housing)?	
How many Part 9 Inspections and/or Plan Reviews (not including housing) have you performed?	
Level 3 – Inspections and/or Plan Reviews (Note: Level 3 Certification is subject to a logbook submission)	
How many years have you been performing Part 3 Inspections and/or Plan Reviews?	
How many Part 3 Inspections and/or Plan Reviews have you performed?	
Employer Verification (for work experience performed as indicated)	
Supervisor Name:	
Title:	
Telephone:	
Email:	

As the Applicant’s supervisor, I hereby confirm that they have performed inspections and/or plan reviews as indicated.

Supervisor’s Signature

Date

Applicant

I agree by signing this application that the above information is accurate and in doing so authorize the NBBOA to access any information, at any time, respecting my studies program, membership status, or other pertinent information contained in my membership file with the NBBOA.

Signature:

Date:

For Office Use Only

Approved by Certification Committee:

Chair:

Signature:

Date: