Form for the submission of details to enable the DAC to advise PCCs on the appointment of an Inspector for the purposes of carrying out the Quinquennial Inspection

|  |  |  |
| --- | --- | --- |
| **1.** | **Full Name:** |  |
| **Title:** | Mr/Mrs/Miss/Ms/Other |

|  |  |  |
| --- | --- | --- |
| **2.** | **Contact Address:** | |
| **Telephone Number:** |  |
| **Fax Number:** |  |
| **E mail:** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **3.** | **Year of Registration:** |  | **Membership Number:** |  | |
| **As Architect** |  | **ARB** |  | |
| **As Chartered Building Surveyor** |  | **RICS** |  | |
| **As Building Surveyor** |  | **FAS** |  | |
| **Date of AABC accreditation in Building Conservation** |  | | | |
| **Date of RIBA accreditation in Building Conservation** | **Specialist Conservation Architect (SCA): for Grade I & II\* Listed** | | |  |
| **Conservation Architect (CA):**  **for Grade II Listed** | | |  |
| **Conservation Registrant (CR):**  **for Unlisted / locally listed Churches** | | |  |
| **Date of RICS accreditation in Building Conservation** |  | | | |
| **Please list your Professional Qualifications (with dates):** | | | | |

|  |  |  |
| --- | --- | --- |
| **4.** | **Name and address of your practice:** | |
| **Telephone:** |  |
| **Fax:** |  |
| **Email address:** |  |
| **Date of formation of practice:** |  |
|  | **Number of principals:** |  |
| **Your status in the practice:** |  |
|  | **Does the practice have full professional indemnity insurance?** |  |
| **Please provide the following details of your practice’s insurance: -** |  |
| **Professional Indemnity Insurer’s Name** |  |
| **Policy Number** |  |
| **Renewal date** |  |
| **Limit of indemnity** |  |
| **Type of policy** |  |
| **Excess** |  |
| **Any restrictive clauses (please continue on another sheet if necessary)** | |

|  |  |
| --- | --- |
| **5.** | **Please provide details of personal cover of your professional indemnity insurance if it is different from the practice cover given above.** |

|  |  |  |  |
| --- | --- | --- | --- |
| **6.** | **Are you an active member of any of the following?** | | |
| * Ecclesiastical Architects’ and Surveyors’ Association | Yes | **No** |
| * Association for Studies in the Conservation of Historic Buildings | Yes | **No** |
| * Society for the Protection of Ancient Buildings | Yes | **No** |
| * Ancient Monuments Society | Yes | **No** |
| * The Georgian Group | Yes | **No** |
| * The Victorian Society | Yes | **No** |
| * The Twentieth Century Society | Yes | **No** |
| * IHBC | Yes | **No** |
| * National / Regional Historic Churches Trust | Yes | **No** |
| * West Midlands Architects Conservation Group | Yes | **No** |
|  | Other (please specify) | | |

**7a. Are you familiar with the Diocesan Advisory Committee/faculty procedure?** Yes / No

**7b. Do you inspect churches in other dioceses?** Yes / No

**If yes, which diocese(s)?**

**7c. Have you received a new approach from a PCC to carry out a Quinquennial**

**Inspection for a church?** Yes / No

**If yes, please specify which church and what is its grade of listing?**

**7d. Please give details of *3* churches in other dioceses for which you are/have been church architect/surveyor. Please give the: - name of the church; Listed Grade; number of years you have been church inspector.**

**7e. Please give details of your experience in the repair and conservation of Anglican church buildings: -**

* **Number of Quinquennial Inspections undertaken (including dates)**
* **Types of repair/conservation work undertaken**
* **Value of the repairs undertaken**

**8a. Please give details of your experience in the repair and conservation of secular historic buildings:**

* **Number of condition surveys undertaken (including dates)**
* **Types of repair works undertaken**
* **Value of the repairs**

**8b. To demonstrate your appropriate skills and expertise, please choose 3 of your most recent, relevant projects (within the last 5 years) and for each give full details of:**

* **The building; its location; its listed grade**
* **The years the work was undertaken; value of work**
* **Type of work undertaken**

**The details should be supported with examples of full Quinquennial Inspection Reports/condition surveys; measured surveys; specification for the repair works; schedules of work and drawings identifying the repairs/details**

**9. What courses on building conservation have you attended in the last five years?**

On a separate sheet, please give full details (including dates) of Continuing Professional Development (CPD) in the last three years – ideally a print-off from your CPD Log through the RIBA website.

1. **What experience of working with Historic England do you have, in connection with church buildings or other historic buildings? In cases where there is tension between conservation of the historic fabric of the building and the PCC’s resources/needs or the requirements of a third party (e.g. Historic England), how would you seek a resolution? If you wish to give a specific example within your experience, please do so.**

Please attach full details

1. **Explain why you are interested in church buildings and how you wish this aspect of your work to develop? If you wish to give examples of your design experience in sympathetically adapting a church or other Listed Building, please do so.**

Please attach a separate sheet

**12. Referees**

Please provide three referees, two of whom have knowledge of your training and experience, if any, in historic buildings, and one from a PCC or DAC. If a senior partner in your practice is supervising your work or acting as a mentor s/he should be one of your referees. Please **do not** include two referees from the same practice that you work for.

|  |  |  |
| --- | --- | --- |
| Name: | Name: | Name: |
| Address: | Address: | Address: |
| Email Address: |  |  |

*I confirm that I am physically able and willing to inspect all areas of a church required to be inspected for a Quinquennial Inspection report.*

*I undertake to notify (in writing) the DAC and all parishes for which I am the inspector if details of my professional indemnity insurance cover change in any way.*

Signed Date

Please send this form and the requested additional information to the DAC secretary Tim Latham at [tim.latham@coventry.anglican.org](mailto:tim.latham@coventry.anglican.org)