

# PODIATRISTS BOARD OF NEW ZEALAND

PO Box 9644, Wellington 6141  
Level 5, 22 Willeston Street,  
Wellington, 6011 New Zealand

Phone +64 4 474 0706 Fax +64 4 918 4746  
[registrar@podiatristsboard.org.nz](mailto:registrar@podiatristsboard.org.nz)

Podiatrists Board of NZ GST No. 73-081-173

## FEES PAYMENT FORM

NAME:	REGISTRATION No: <b>80-0</b>
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	Application for:	Disciplinary Levy Portion	AMOUNT PAYABLE \$ (GST incl)
<input checked="" type="checkbox"/>	<b>Please tick the appropriate box</b>		
	<b>REGISTRATION:</b>		
<input type="checkbox"/>	New Zealand qualification (incl re-registration & restoration to Register)		<b>378.00</b>
<input type="checkbox"/>	Overseas qualification		<b>817.00</b>
<input type="checkbox"/>	Trans-Tasman Mutual Recognition		<b>817.00</b>
<input type="checkbox"/>	Further Scope of Practice		<b>235.00</b>
	<b>ANNUAL PRACTISING CERTIFICATE (APC) INCLUDING DISCIPLINARY LEVY</b>		
<input type="checkbox"/>	APC for full year 1 April to 31 March	175.00	<b>992.00</b>
<input type="checkbox"/>	APC <b>if applying after 1 April</b> and held APC in previous year	175.00	<b>1,095.00</b>
<input type="checkbox"/>	APC <b>if never previously registered</b> as a Podiatrist (valid from 1 Dec until 31 March the following year)	43.75	<b>247.75</b>
<input type="checkbox"/>	APC (valid 1 January until 31 March of the same year) for <b>Return to Practice applicants and new Overseas Qualified Registrants</b>	87.50	<b>495.50</b>
<input type="checkbox"/>	APC with further scope of practice: <b>Podiatric Surgery</b>	175.00	<b>1,167.00</b>
<input type="checkbox"/>	APC with further scope: <b>Podiatric Surgery &amp; Podiatric Radiographic Imagery</b>	175.00	<b>1,187.00</b>
<input type="checkbox"/>	APC with further scope/s and <b>applying after 1 April</b> and held APC in previous year	175.00	<b>1,270.00</b>
	<b>OTHER FEES</b>		
<input type="checkbox"/>	<b>NON-PRACTISING INACTIVE MAINTENANCE FEE</b>	175.00	<b>260.00</b>
<input type="checkbox"/>	Certificate of Registration		<b>36.00</b>
<input type="checkbox"/>	Supply of any documents (other than Certificates of Registration)		<b>48.00</b>
<input type="checkbox"/>	Addition or alteration to Register (excl. change of name or address)		<b>71.00</b>
<input type="checkbox"/>	Inspection or copy of Register		<b>30.00</b>
<input type="checkbox"/>	Cultural (Open Book) Exam: Return to Practice: no prior NZ APC / Re-Registration		<b>1,196.00</b>
<input type="checkbox"/>	Cultural (Open Book) Exam: Return to Practice APC/ Overseas qualified & prior NZ reg pre OBE)		<b>598.00</b>
<input type="checkbox"/>	Cultural (Open Book) Examination Re-sit		<b>393.00</b>
<input type="checkbox"/>	Review Fee (practitioner competence review: up to 1/3 of costs to the Board)		<b>2,000 to 15,000 maximum</b>
	<b>TOTAL</b>	<b>\$</b>	

# Payment Details

All fees must be paid in New Zealand dollars (NZ\$) by credit card, NZ trading cheque or bank draft  
Your application cannot be processed if payment is received in a foreign currency.

CREDIT CARD: (please tick one)  Visa  Mastercard

Card Number

Expiry Date: \_\_\_\_/\_\_\_\_

Amount (NZ\$) \_\_\_\_\_

Cardholder's Name: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

OR

## CHEQUE OR BANK DRAFT

Enclosed is my cheque / bank draft for NZ\$ \_\_\_\_\_ made payable to the "Podiatrists Board of New Zealand"

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### OFFICE USE ONLY

Amount Paid \$ \_\_\_\_\_ Payment for:  Reg  APC  Reg Cert  IM fee  Other \_\_\_\_\_ Year: \_\_\_\_\_

Payment Method:  Chq Clearance Date: \_\_\_\_\_ Entered in Database  Entered in NAV

M'card  Visa Approval No: \_\_\_\_\_ Signed \_\_\_\_\_ Date \_\_\_\_\_