

ASBESTOS REMOVAL LICENCE – APPLICATION

ASBESTOS – 01 JUNE 2016

Complete this form to apply for a new licence or to renew a licence for asbestos removal work under the WHS Regulation.

Complete the *Asbestos removal supervisor nomination form* (Asbestos – 03) (catalogue no. SW08074) to add additional supervisors to your licence application.

How to fill in this form

Please refer to the *Guide for applicants for asbestos removal and asbestos assessor licences and notifications* (catalogue no. SW08125) when completing this application.

Please type directly into the form. When complete, save a copy before emailing or printing.

If completing by hand, please print clearly and mark box(es) with a tick where required.

Fees

Refer to the SafeWork NSW fees schedule on the SafeWork NSW website or call 13 10 50.

Lodgement instructions

Email (preferred): licensing@safework.nsw.gov.au
(credit card payments only)

Post: SafeWork NSW – Locked Bag 2906,
Lisarow, NSW 2252.

Email, or post the application – do not send more than once.

Privacy compliance statement

This information is collected by SafeWork NSW (the Regulator) for the purposes of undertaking the evaluation, assessment and processing of an application for a licence to carry out asbestos removal work, as required by the WHS Act and WHS Regulation.

The Regulator may also use this information for the purposes of confirming applicant details in the event that renewal or replacement licence is applied for and it may also be used to establish and maintain an external database and to assist the regulator and its inspectorate with their work generally. This information may also be made available to other state, territory and the Commonwealth regulatory authorities, including the NSW Department of Industry Skills and Regional Development, Office of Environment and Heritage and the Dust Diseases Board.

Except for the purpose of prosecution and unless such disclosure is otherwise required or permitted by law, the information will not be otherwise accessed by any third parties in a way that would identify the individual, without the consent of that individual.

Applicants are able to gain access to personal information pertaining to their application that is held by the Regulator. You may also apply to the Regulator to access and correct any of your own personal information that is inaccurate, incomplete, not relevant or out of date. Applications should be made in writing to the Privacy Contact Officer, SafeWork NSW, Gosford Office, Locked Bag 2906, Lisarow, NSW 2252.

SECTION 1. TYPE OF APPLICATION

Mark appropriate boxes

For renewals you must complete sections 1, 5, 10, 11 and 12 and sections 2, 3, 4, 6, 7, 8 and 9 if details have changed from previously advised. You must also submit details of asbestos removal work of the class for which the renewal is sought. Include dates when the work was performed.

New application. Please go to section 2.
Asbestos removal licence number

Renewal. Please complete the following.
Expiry date (DD/MM/YYYY)

Name on the licence

State/territory or Commonwealth (Cth) of issue.

Was your expiring licence issued by the work health and safety regulator of another state or territory or the Commonwealth?

Yes. If yes please provide reasons for requesting the renewal in NSW.

No

Details of asbestos removal work performed in the last five years. If space is insufficient please attach to this application a sheet of paper with the information.

SECTION 2. CLASS OF ASBESTOS

Friable (Class A) asbestos removal

Non-friable (Class B) asbestos removal

Friable (Class A) asbestos fire doors and safes only

SECTION 3. CERTIFIED SAFETY MANAGEMENT SYSTEM

Friable asbestos (Class A) applicants and licence holders (renewals) are required to submit with their applications evidence that a certified safety management system is in place that complies with AS 4801: 2001 *Occupational health and safety management system* or its equivalent.

I have attached evidence that I have the required safety management system in place.

SECTION 4. APPLICANT DETAILS

Mark appropriate boxes

Copy of the certificate of business (trading) name (if applicable) and copy of the certificate of registration of the corporation (if applicable) must be submitted with the application.

Individual Corporation

I have attached a copy of the registration of business (trading) name (where applicable).

I have attached a copy of the certificate of registration of the corporation (corporation applicants).

SECTION 4.1 INDIVIDUAL APPLICANT OR CONTACT PERSON FOR A CORPORATION

Title	Family/Surname	Sex	
		Male	Female
Given name		Date of birth (DD/MM/YYYY)	
Other names		Daytime contact number	Mobile number
Email			

SECTION 4.2 CORPORATION DETAILS (IF APPLICABLE)

Registered name	Registered business (trading) name (if applicable)
-----------------	--

ABN (for Australian businesses only)

SECTION 4.3 ADDRESS (STREET ADDRESS FOR AN INDIVIDUAL OR REGISTERED BUSINESS ADDRESS FOR A CORPORATION)

STREET ADDRESS (MUST NOT BE A PO BOX)

Unit number/Street number/Property number
(include Lot or DP number if applicable)

Street name

Suburb

State

Postcode

POSTAL ADDRESS

Same as street address

Unit number/Street number/Property number
(include Lot or DP/PO Box/GPO Box/Private Bag/Locked Bag)

Street name

Suburb

State

Postcode

SECTION 5. INSURANCE

If you are an employer and not exempt under the *Workers Compensation Act 1987* (WC Act) from holding a workers compensation insurance policy, you must supply a certificate of currency for workers compensation insurance with this application. Refer to the *Guide for applicants for asbestos removal and asbestos assessor licences and notifications* (catalogue no. SW08125).

I have attached a copy of the certificate of currency for workers compensation (only required for employers that are not exempt employers).

SECTION 6. NOMINATED SUPERVISOR'S DETAILS

Individual applicants who intend to supervise the carrying out of the asbestos removal work for which authorisation is sought and do not intend to nominate additional supervisors go to section 7.

Title	Family/Surname	Unit number/Street number/Property number (include Lot or DP/PO Box/GPO Box/Private Bag/Locked Bag)	
Given name		Street name	
Other names		Suburb	
Sex		State	Postcode
	Male Female		
Date of birth (DD/MM/YYYY)			
Daytime contact number		<p>Additional supervisor(s) You must complete and attach the <i>Asbestos removal supervisor nomination form</i> (Asbestos - 03) (catalogue no. SW08074) for each additional supervisor that you wish to nominate.</p>	
Mobile number		<p>I am nominating additional supervisor(s) Yes. Please complete details below. No. Please go to section 7.</p>	
Email		<p>I have attached (insert the number) of asbestos removal supervisor nomination forms.</p>	

SECTION 7. QUALIFICATIONS OF THE INDIVIDUAL APPLICANT OR THE NOMINATED SUPERVISOR

Refer to the *Guide for applicants for asbestos removal and asbestos assessor licences and notifications* (catalogue no. SW08125) for more details about the knowledge and experience required.

Have you previously been authorised as a supervisor or licence holder for the asbestos removal licence sought?

Yes. Please indicate the asbestos removal work and the licence holder name and/or the licence number for whom you supervised the work.

No. Please go to section 8.

Non-friable asbestos (Class B) removal work

Licence holder name/licence number

Friable (Class A) asbestos removal work

Licence holder name/licence number

Friable (Class A) asbestos fire doors and safes only

Licence holder name/licence number

Please go to section 10.

SECTION 8. EXPERIENCE OF THE INDIVIDUAL APPLICANT, IF THEY ARE TO SUPERVISE THE ASBESTOS REMOVAL WORK OR THE NOMINATED SUPERVISOR

Refer to the *Guide for applicants for asbestos removal and asbestos assessor licences and notifications* (catalogue no. SW08125) for more details.

I have attached a description of the work undertaken

I have attached written references that support the description of the work undertaken

Please go to section 9.

SECTION 9. EVIDENCE OF TRAINING OF THE INDIVIDUAL APPLICANT, IF THEY ARE TO SUPERVISE THE ASBESTOS REMOVAL WORK OR THE NOMINATED SUPERVISOR

Attach a copy of a certificate showing successful completion of the Vocational Education and Training (VET) course for the asbestos authorisation(s) sought. Refer to the *Guide for applicants for asbestos removal and asbestos assessor licences and notifications* (catalogue no. SW08125) for more information.

I have attached a copy of my certificate(s)

SECTION 10. FURTHER INFORMATION

Have you and in the case of a corporation applicant, has the corporation and each officer of the corporation ever been convicted or found guilty of an offence under the WHS Act or WHS Regulation or under the workplace health and safety law of another state, territory or the Commonwealth?

Yes. If yes provide details. No

Have you and in the case of a corporation applicant, has the corporation and each officer of the corporation been convicted or found guilty of any offence in relation to the unlawful disposal of hazardous waste under the *Protection of the Environment Operations Act 1997* (PEO Act)?

Yes. If yes provide details. No

Have you and in the case of a corporation applicant, the corporation and each officer of the corporation ever entered into an enforceable undertaking under the WHS Act or under the workplace health and safety law of another state, territory or the Commonwealth?

Yes. If yes provide details. No

Have you and in the case of a corporation, the corporation and each officer of the corporation been previously refused an equivalent licences under the workplace health and safety law of another state, territory or the Commonwealth?

Yes. If yes provide details. No

Have you and in the case of a corporation, the corporation and each officer of the corporation previously held an equivalent licence under the workplace health and safety law of another state, territory or the Commonwealth?

Yes. If yes provide details. No

Was there any condition(s) on the licence?

Yes. If yes provide details. No

Was the licence suspended or cancelled? (include details of any disqualification)

Yes. If yes provide details. No

SECTION 11. APPLICANT'S DECLARATION

The declaration must be signed by each individual partner for partnership applicants or each individual in an unincorporated association for an unincorporated association applicant. Please copy this page and complete the declaration as required.

I, _____ (print name)

declare and understand that:

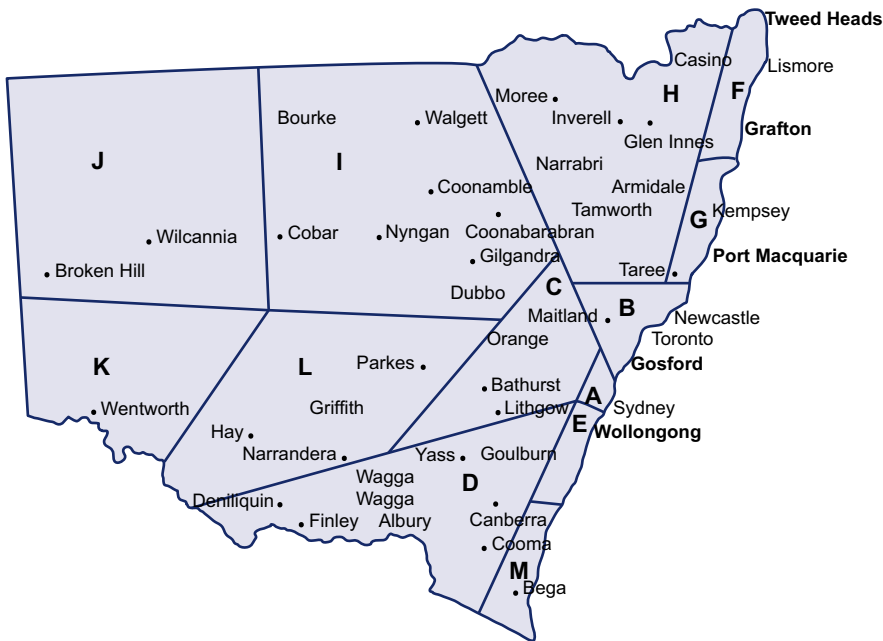
- I have authority from the corporation to complete and submit this application (corporation applicants)
- the information supplied in this application is true and correct to the best of my knowledge
- I consent to SafeWork NSW making enquiries and exchanging information with work health and safety regulators of other states, territories and the Commonwealth regarding any matter relevant to this application
- each nominated supervisor is at least 18 years old
- I and/or my nominated supervisor(s) have maintained our/their competency to carry out the work covered by the licence (renewals only).

SafeWork NSW compiles a public register of asbestos removal licence holders on the SafeWork NSW website.

I agree to my (licensee) details being published by SafeWork NSW. Yes No

If yes, please mark the proposed region(s) you will operate in, as per the SafeWork NSW region map key below.

A B C D E F G H I J K L M or ALL



Applicant's signature

Date (DD/MM/YYYY)

SECTION 12. LODGEMENT FEES

A fee must be paid on lodgement of the application form.

Refer to the [SafeWork NSW fees schedule](http://www.safework.nsw.gov.au) available at www.safework.nsw.gov.au.

Pay by cheque. Enclose a cheque made payable to SafeWork NSW.

Pay by money order. Enclose a money order made payable to SafeWork NSW.

Pay by credit card. Please charge \$ _____ to my: MasterCard Visa

A payment processing fee of 0.40% applies to MasterCard and Visa

Card number

Card expiry date (MM/YYYY)

Cardholder name (please print name as displayed on credit card)

Cardholder signature

Date (DD/MM/YYYY)

SECTION 13. CHECKLIST TO SUBMIT YOUR APPLICATION

Copy of certificate of currency of workers compensation insurance. Applicants who are not exempt employers (please refer to the *Guide for applicants for asbestos removal and asbestos assessor licences and notifications* (catalogue no. SW08125)) must attach a legible copy of the certificate of currency for workers compensation insurance to this application.

Copy of certificate(s) showing successful completion of the VET course(s) for which authorisation is sought. (Only required if seeking authorisation for the first time).

Description of work undertaken and references supporting the description of work undertaken.

To add additional supervisor(s) to a licence complete and submit the *Asbestos removal supervisor nomination form* (Asbestos - 03) (catalogue no. SW08074) for each supervisor.

You must pay the fee with this application.