

CHANGE OF DETAILS – APPLICATION

GENC – 01 DECEMBER 2017

Complete this form to change an individual, registered business or trading name, the residential, main or postal address or contact details for a licence, certificate or card issued by SafeWork NSW (the Regulator).

How to fill in this form

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.

Certified copy means a photocopy of the original document that has been certified as a true copy by a justice of the peace. The JP must provide, beneath the certification, their signature, the date on which the certification was made, their JP registration number and the state in which they are registered

For assistance call 13 10 50

Fees

There is no fee associated with this form.

Lodgement instructions

Email (preferred): licensing@safework.nsw.gov.au

Post: Customer Service Centre, SafeWork NSW, Locked Bag 2906, Lisarow, NSW 2252.

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

Privacy compliance statement

Information that you voluntarily provide in this form is collected by SafeWork NSW to assess and process your application.

SafeWork NSW intends to use and disclose the information (including any personal information) you have provided in the following ways:

1. to exercise its functions under the Work Health and Safety Act 2011, including to administer, monitor and enforce compliance with that Act
2. to record your information on a licence register, parts of which will be published online
3. to disclose your information to other state, territory and the Commonwealth regulatory authorities
4. to educate about work health and safety and contribute to external research about work health and safety
5. as otherwise required or permitted by law, including for the purpose of prosecution

SafeWork NSW has a Privacy Management Plan which provides more detailed information about who SafeWork NSW is, how to contact SafeWork NSW, and how SafeWork NSW manages personal and health information in line with NSW privacy laws. A copy of the Privacy Management Plan is available at www.safework.nsw.gov.au.

The Privacy Management Plan provides detailed information about how you may access or amend personal information held about you by SafeWork NSW.

SECTION 1. DETAILS TO BE CHANGED

Mark the appropriate boxes.

Individual, corporation, registered business or trading name

Postal address

Main address

Contact details

SECTION 2. LICENCE/CERTIFICATE/CARD TYPE AND DETAILS

Mark the appropriate boxes.

High risk work licence

General construction induction card

Explosives licence

Security clearance

Asbestos or demolition licence

Please provide licence details:

Type of licence

Licence number

SECTION 3. EXISTING DETAILS

SECTION 3.1 INDIVIDUAL

Title Family/Surname

Other names

Given name

Date of birth (DD/MM/YYYY)

SECTION 3.2 CORPORATION

Registered name

Registered business (trading) name (if applicable)

ABN

SECTION 3.3 MAIN ADDRESS DETAILS

STREET ADDRESS (MUST NOT BE A PO BOX)

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

POSTAL ADDRESS

Same as main address

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

Street name

Street name

Suburb

Suburb

State

Postcode

State

Postcode

SECTION 5. APPLICANT'S DECLARATION

It is an offence under the WHS Act and Regulation and Explosives Act and Regulation for a person to make a statement that the person knows to be false or misleading.

I understand and declare that:

- I have read the privacy compliance statement and consent to SafeWork NSW using my information (including personal information) as outlined in that statement
- To the extent that I have provided personal information about another person, I have authority from that person to complete and submit this application and to provide consent on that person's behalf
- the information supplied in this application is true and correct to the best of my knowledge.
- I have authority from the registered business/corporation to complete and submit this application (business/corporate applicants only).

Applicant's signature

Date (DD/MM/YYYY)

SECTION 6. CHECKLIST TO SUBMIT YOUR APPLICATION

Attached Document

Applicants who are requesting a change of name must provide either:

- certified copy of the marriage certificate issued by a Registry of Births, Deaths and Marriages in Australia
- certified copy of the change of name certificate issued by a Registry of Birth, Deaths and Marriages in Australia.

Return of licences/cards

Licences/cards containing old details must be returned to the Regulator within seven days of receipt of the replacement to: Customer Service Centre, SafeWork NSW, Locked Bag 2906, Lisarow, NSW 2252.