

NOTIFICATION OF THE DISPOSAL, DESTRUCTION, THEFT, LOSS OR DAMAGE TO NOTICE OF SATISFACTORY ASSESSMENT/ASSESSMENT SUMMARY BOOKS AND/OR FORMS

JUNE 2016

This form is to be completed by a SafeWork NSW accredited assessor to advise SafeWork NSW (the Regulator) of the disposal, destruction, theft, loss or damage to Notice of Satisfactory Assessment (NSA)/Assessment Summary (AS) books and/or forms.

The assessor is required to send this form, within 14 days of becoming aware of such details, to:

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

Authorisations and Third Party Management
SafeWork NSW
Locked Bag 2906
Lisarow NSW 2252

SECTION 1. SAFEWORK NSW ACCREDITED ASSESSOR DETAILS

Name	Accreditation Number
Contact number	Email

SECTION 2. DECLARATION OF DISPOSED RECORDS

I, _____ of _____
hereby certify that the records described below were securely disposed of on _____ .
NSA/AS series from _____ NSA/AS series to _____
NSA/AS series from _____ NSA/AS series to _____
NSA/AS series from _____ NSA/AS series to _____
SafeWork NSW Accredited Assessor signature _____ Date (DD/MM/YYYY) _____

SECTION 3. DECLARATION OF DESTROYED, LOST, STOLEN OR DAMAGED RECORDS

I, _____ of _____
hereby certify that the records described below have been:

Destroyed Lost Stolen Damaged

A statement of how the following records were destroyed/lost/stolen/damaged is to be made on the next page.

NSA/AS series from _____ NSA/AS series to _____

NSA/AS series from _____ NSA/AS series to _____

NSA/AS series from _____ NSA/AS series to _____

SafeWork NSW Accredited Assessor signature _____ Date (DD/MM/YYYY) _____

DECLARATION OF ACCREDITED ASSESSOR

I, _____ of _____
do hereby solemnly declare and affirm that the records notified as:

Destroyed Lost Stolen Damaged

are in such state as a result of: (the facts to be stated according to your knowledge, belief or information)

I make this solemn declaration conscientiously believing the same to be true.

Declared at _____ on this _____ day of _____ 20

SafeWork NSW Accredited Assessor signature

Name and signature of witness