

# Application for an explosive business licence

Use this form to apply for a new or the renewal of a licence to store explosives in accordance with Regulation 4, 5B and 5D of the Dangerous Goods Regulations.

Refer to the licensing fees and charges page for the application fee.

**Application type:** New  Renewal  Replacement  Amendment

**Licence type:** Store  Sell  Possess

## 1. Licence details (renewal, replacement or amendment only)

Licence number:		Expiry date:	
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## 2. Business details

Business name:		ABN:	
Contact person:		Position:	
Business address:			
Suburb:	State:	Postcode:	
Is your postal address the same as above? (If no, complete below):		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Postal address:			
Suburb:	State:	Postcode:	
Phone number:	Mobile number:		
Email address:			

## 3. Emergency contact person

Is your emergency person the same as above? (If no, complete below)		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Contact person:			
Phone number:	Mobile number:		
Email address:			

## 4. Site plan - (new, renewal or amendment only)

For the purpose of a new or amendment application, the applicant is required to provide site plan/photos of the premises to show distances from all occupied buildings and sources of ignition.

Current site plan attached

## 5. Location of storage

Site name:			
Site address:			
Suburb:	State:	Postcode:	
Is this licence for a mine site: If yes, provide details of granted minerals title held with the Department of Industry, Tourism and Trade - Mineral Division		Yes <input type="checkbox"/>	No <input type="checkbox"/>

**6. Details of goods**

Proper shipping name	UN number	DG class	Quantity & Unit (L or Kg or Number)	Storage method

**7. Disclosure of information**

Have you ever been convicted or found guilty of any offence under the <i>Dangerous Goods Act</i> or Regulations in the Northern Territory, another State, and Territory or Commonwealth? If yes, please provide details below.	Yes <input type="checkbox"/> No <input type="checkbox"/>

**8. Receiving licence**

How do you wish to receive the licence?	Post <input type="checkbox"/>	Email <input type="checkbox"/>	Collection <input type="checkbox"/>
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**9. Applicant declaration**

I do solemnly declare that the information in this application is true and correct to the best of my knowledge.

I do solemnly declare that the business mentioned above has knowledge and personnel have training in the safe storage and handling of explosives for which authorisation is sought.

I consent to the Competent Authority making enquiries and exchanging information with regulators in other States, Territories or the Commonwealth regarding any matter relevant to this application.

Applicant name:			
Applicant signature:		Date:	

**Checklist**

Licence requirements	New	Renewal	Replacement	Amendment
Application form is complete and signed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Payment of application fee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Site plan attached	<input type="checkbox"/>	<input type="checkbox"/>	N/A	<input type="checkbox"/>

**Privacy statement**

The Department of Attorney-General and Justice complies with the Information Privacy Principles scheduled to the *Information Act*.

**Lodgement**

Complete applications can be lodged in person, email or via post at a Territory Business Centre below:

<b>Darwin</b>	Darwin Corporate Park, Building 3, 631 Stuart Highway Berrimah
<b>Katherine</b>	Big Rivers Government Centre - 5 First Street, Katherine
<b>Alice Springs</b>	Ground floor, The Green Well building, 50 Bath Street
<b>Tennant Creek</b>	Shop 2, Barkly House, Cnr Davidson and Patterson Street
<b>Phone:</b> 1800 193 111 <b>Email:</b> <a href="mailto:territorybusinesscentre@nt.gov.au">territorybusinesscentre@nt.gov.au</a> <b>Postal:</b> GPO Box 9800, Darwin, NT 0801	

**Payment details**

Cash	<input type="checkbox"/>	Cheque (Made out to Receiver of Territory Money)	<input type="checkbox"/>	Credit card (Visa or MasterCard only)	<input type="checkbox"/>
Cardholder name:					
Card number:					
I hereby authorise the Territory Business Centre to debit the above credit card for the amount of				\$	
Cardholder signature:				Date:	