

Notification amendment of Asbestos removal

Use this form to notify of an amendment to a previously submitted asbestos removal notification.

Complete the relevant fields you wish to amend.

1. Reference number

Reference number (e.g.2021NOW00000):	
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2. Asbestos business details

Business name:		ABN:	
Contact person:			
Phone number:		Mobile number:	
Email address:			

3. Date amendment

Estimated start date:		Estimated finish date:	
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4. Quantity amendment

Estimated quantity of asbestos to be removed (square metres):	
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5. Workers amendment (provide workers details below, if more than 6 workers please attach additional pages)

Number of workers:			
Number	Worker name	Competency unit achieved	Issue date
1			
2			
3			
4			
5			
6			

6. Supervisor amendment (note: the supervisor must be approved on your business licence)

Number	Supervisor name	Phone number	Email address
1			
2			
3			
4			
5			

7. Other amendments

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8. Notifier declaration

The information in this notification is true and correct to the best of my knowledge.

I consent to the Work Health Authority making enquiries and exchanging information with work health and safety regulators in other States, Territories or the Commonwealth regarding any matter relevant to this notification.

I have submitted this form electronically (signature is not required)



Notifier signature:

Date:

Privacy statement

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

Lodgement

Completed applications can be lodged in person, email or via post at a NT WorkSafe below:

Phone: 1800 019 115

Email: ntworksafe@nt.gov.au

Postal: GPO Box 1722, Darwin NT 0801

In person: Darwin Corporate Park, Building 3, 631 Stuart Highway, Berrimah NT