Application for a shotfirer licence

Use this form to apply for a shotfirers licence in accordance with Regulation 133 of the Dangerous Goods Regulations 1985. Applicants must have attained the age of 18.

For the relevant application fee, visit the NT WorkSafe licensing fees and charges webpage. **Application type:** New Renewal Reciprocal Licence type: Tunnelling and underground mining Agricultural/Seismic/Small scale blasting П Quarrying/Open cut Fireworks (display) Construction Fireworks (special effects) Other (please specify): 1. Current licence details (Renewal only) Licence number: Expiry date: 2. Applicant details Surname: Date of birth: Given names: Residential address: Postcode: Suburb: State: Is your postal address the same as above? If no, complete below: П Yes Nο Postal address: State: Postcode: Suburb: Mobile number: Home number: Email address: 3. Medical details Do you suffer from defective hearing, defective vision or a physical infirmity, which would render you unfit to safely perform the duties as a holder of the licence for which you have Yes No applied? (If yes please complete below) 4. Licence cancellation/suspension/refusal details Have you ever had your licence or certificate of competency issued by a Regulatory Authority Yes No cancelled, suspended or refused? (If yes, complete below) 5. Employer details Current employer name: Phone number: Supervisor name: Previous employer name (if applicable):



Phone number:



Supervisor name:

| 6. Competency training (New only) | | | | | | | | | |
|--|---------------------------------------|------------------|--|--|--|--|--|--|--|
| For the relevant licence you are applying for, attach copies of the following: | | | | | | | | | |
| Blasting and fireworks ONLY | | | | | | | | | |
| Evidence of competency training | | | | | | | | | |
| Letter from employer outlining in house training/experience | | | | | | | | | |
| Model rockets ONLY | | | | | | | | | |
| Current certification from a rocketry organisation | | | | | | | | | |
| 7. Evidence of continual use (Re | enewal and Reciprocal only) | | | | | | | | |
| Attach blast plans/log books; and | | | | | | | | | |
| Attach a letter from your employer/supervisor stating your practical or continual experience | | | | | | | | | |
| 8. Reciprocal requirements (Rec | ciprocal only) | | | | | | | | |
| Attach a copy of the front and back of your current interstate shotfirer licence: | | | | | | | | | |
| Supervisor name: | | Licence number: | | | | | | | |
| Supervisor signature: | | Date: | | | | | | | |
| 9. Criminal history check (not m | ore than 6 months old at time of appl | ication) | | | | | | | |
| Attached criminal history fingerprint check (New) | | | | | | | | | |
| Note: A current dangerous goods security card can be accepted in place of a criminal history check. | | | | | | | | | |
| 10. Proof of identity (ID) | | | | | | | | | |
| Applicants <u>must attach</u> either one of the following combinations: One primary and two secondary documents; or Two primary and one secondary documents from the list below. ID must include at least one type of primary ID that contains the applicants name and date of birth. If you are unable to provide the required documents please contact NT WorkSafe. | | | | | | | | | |
| Primary document | | | | | | | | | |
| Australian birth certificate/card | | | | | | | | | |
| Australian passport (note: passports are still valid for 2 years after expiry, unless cancelled) | | | | | | | | | |
| Australian citizenship certificate | | | | | | | | | |
| Australian drivers licence | | | | | | | | | |
| Licence or permit issued by the Commonwealth, State or Territory government that has your DOB and photo i.e HRWL licence, working with children's card etc | | | | | | | | | |
| Proof of Age Card issued by an Australian State or Territory | | | | | | | | | |
| Identity document issued by an Aboriginal Land Council that has your photograph | | | | | | | | | |
| Secondary document | | | | | | | | | |
| Photo ID card showing you are a Co | ommonwealth, State or Territory Gove | ernment employee | | | | | | | |
| Medicare, centrelink or health care card | | | | | | | | | |
| Credit card or debit card – one per bank only | | | | | | | | | |
| Council rates notice with your name and current residential address | | | | | | | | | |
| Utilities notice with your name and current residential address | | | | | | | | | |
| Foreign drivers licence | | | | | | | | | |

| 11. Receiving licence | | | | | | | | |
|---|--|--------------------------|-----------------------------|--------------|-----------------|-----------|--|--|
| How do you wish to receive the licence? | | | | Col | Collection | | | |
| 12. Applicant declara | ation | | | | | | | |
| I consent to the Compet Territories or the Comm | pplication is true and correct to the beent Authority making enquiries and eonwealth regarding any matter relevanties who wish to verify your licence of your licence. | exchanging ant to this a | information vapplication. N | T WorkSafe | may also discl | lose your | | |
| Applicant name: | | | | | | | | |
| Applicant signature: | Dat | | | ate: | | | | |
| Checklist | | | · | | | | | |
| Licence requirements | | | | New | Reciprocal | Renewal | | |
| Application is complete and signed | | | | | | | | |
| Prescribed application fee (see <u>licensing fees and charges</u> page) | | | | | | | | |
| One clear, passport size photograph no more than 6 months old attached. Alternatively photographs can be taken at any Territory Business Centre | | | | | | | | |
| Proof of identity documents attached | | | | | | | | |
| Copy of competency training certificate and letter from employer outlining in-house training attached | | | | N/A | N/A | | | |
| Evidence of continual use attached i.e. blast plans or log books | | | N/A | | | | | |
| Letter from your employer/supervisor stating your practical or continual experience | | | N/A | | | | | |
| Criminal history check attached or copy of front and back of DG security card | | | | | | | | |
| Copy of front and back of current interstate shotfirer licence attached | | | N/A | | N/A | | | |
| Privacy statement | | | | | | | | |
| The Department of Atto Information Act 2002. | rney-General and Justice complies w | ith the Info | ormation Priva | cy Principle | es scheduled to | the | | |
| Lodgement | | | | | | | | |
| Complete applications ca | an be lodged in person, email or via p | ost at a Te | rritory Busine | ss Centre b | elow: | | | |
| Darwin | Darwin Corporate Park, Building 3, 631 Stuart Highway Berrimah NT. | | | | | | | |
| Katherine | Big Rivers Government Centre - 5 First Street, Katherine | | | | | | | |
| Alice Springs | Ground floor, The Green Well building, 50 Bath Street. | | | | | | | |
| Tennant Creek | Shop 2, Barkly House, Cnr Davidson and Patterson Street. | | | | | | | |
| Phone: 1800 193 111 | Email: <u>territorybusinesscentr</u> | e@nt.gov.a | <u>u</u> Postal | : GPO Box | 9800, Darwin, | NT 0801 | | |
| Payment details | | | | | | | | |
| | ement of this application form. Paymo | ent can be | made by: | | | | | |
| Cash (in person Cheque (made o | only); or out to Receiver of Territory Monies); o | or | | | | | | |
| Credit card (Visa | or MasterCard accepted in person of will contact you via phone for navmon | or over the | phone). Note: | A staff me | mber from the | Territory | | |

Receipt number:

Amount paid:

Payment date: