Application for a replacement licence - Major hazard facility

This form is used to apply for a replacement major hazard facility licence in accordance with Regulation 594 of the Work Health and Safety (National Uniform Legislation) Regulations.

Application fee: \$50

1. Licence holder details

Major hazard facility	licence number:					
Company name:						
Trading name:				ABN/ACN:		
Contact person:				Position:		
Postal address:						
Suburb:			State:		Postcode:	
Work number:		Mobile	number:			
Email address:						

2. Reason for replacement

Lost		Stolen	Destroyed	
Desc	ribe how the	e licence was lost, stolen or destroyed:		

3. Receiving licence

	How do you wish to receive the replacement licence?	Post		Email		Collection	
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4. Applicant declaration

Section 268 of the WHS Act specifies that a person must not give information in complying or purportedly complying with the Act that the person knows to be false or misleading in a material particular; or omits any matter or thing without which the information is misleading. This section has a maximum penalty of \$10,000 for an individual and \$50,000 for a body corporate.				
The information in this	application is true and correct to the best of my knowledge.			
I consent to the Work Health Authority making enquiries and exchanging information with WHS Regulators in other States, Territories or the Commonwealth regarding any matter relevant to this application.				
Applicant name:				
Applicant signature:		Date:		

Privacy statement

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



Lodgement					
Completed applications can be lodged in person, email or via post at a Territory Business Centre below:					
Darwin	Darwin Corporate Park, Building 3, 631 Stuart High	nway Berrir	nah NT.		
Katherine	Shop 1, Randazzo Building, 18 Katherine Terrace.				
Alice Springs	Ground floor, The Green Well building, 50 Bath Street.				
Tennant Creek	Shop 2, Barkly House, Cnr Davidson and Patterson	n Street.			
Phone: 1800 193 111	3 111 Email: territorybusinesscentre@nt.gov.au Postal: GPO Box 9800, Darwin, NT 0801				
Payment details					
Cash 🗌 Che	Cash Cheque (Made out to Receiver of Territory Money) Credit card (Visa or MasterCard Only)				
Cardholder name:					
Card number:	Expiry:				
I hereby authorise the Territory Business Centre to debit the above credit card for the amount of \$					
Cardholder signature:			Date:		