## Application for a assessment report book - HRW Assessor

Use this form to apply a high risk work licence assessment report book.

**Note:** if a representative is collecting book(s) on behalf of an HRW Assessor they must complete section For the relevant application fee, visit the licensing fees and charges webpage.

1. Accreditation	details	ls																															
Accreditation number	r:																		E	Exp	oiry:												
2. HRW Assessor	r deta	ails	5																														
Surname:																																	
Given names:																					Date	of	bir	:h:									
Residential address:																																	
Suburb:																			Sta	te:						Р	ostc	ode	::				
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Postal address:																																	
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Phone number:															N	1ot	oile	n	um	bei	r:												
Email address:																																	
3. Book requiren	nents	5																															
Number of books req	uired:																																
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4. HRW Assessor	r repr	es	e	nt	ati	ve	(if a	ap <sub> </sub>	plio	cal	ble	)																					
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Representative name	:																																
Representative signat	ture:																					Dat	e:										
5. Receiving bool	ks																																
How do you wish to r	receive	e th	ne	bo	ook	(s?									Pos	t								(	Col	llec	tion						
6. HRW Assessor	r decla	lara	at	tio	n																												
I do solemnly declare I consent to the Work Territories or the Com	: Health	h A	٩u	ıth	orit	ty m	akiı	ing	g er	nqı	uiri	es a	and	ex	cha	ngi	ing	; in	ıfor	ma	atior								oth	ner	Stat	tes,	
Assessor name:																																	
Assessor signature:				_				_								_						Da	ate:										





Checklist										
Application is complete and signed										
Payment of application fee										
A copy of the front and back of HRW Assessor representative photo ID (if applicable)										
A copy of the front and back of HRW Assessor accreditation										
Privacy stateme	nt									
The Department of Information Act 200	Attorney-General and Justice complies with the Information Privacy Principles scheduled t 2.	o the								
Lodgement										
Complete application	ons can be lodged in person, email or via post at a Territory Business Centre below:									
Darwin	Darwin Corporate Park, Building 3, 631 Stuart Highway Berrimah NT.									
Katherine	Big Rivers Government Centre - 5 First Street									
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 1	11 Email: <u>territorybusinesscentre@nt.gov.au</u> Postal: GPO Box 9800, Darwin	, NT 0801								
Payment details										
Cash $\square$	Cheque (Made out to Receiver of Territory Money) 🗆 Credit card (Visa or MasterCard on	ıly)								
Cardholder name:										
Card number:	Expiry:									
I hereby authorise t	he Territory Business Centre to debit the above credit card for the amount of \$									
Cardholder signatur	e: Date:									