Use this form to apply for a vehicle licence to transport explosives when carrying a Category 3 load only. For further information on category loads refer to the Australian Explosives Code.

Applicant must have attained the age of 21.

For the relevant application fee, visit the licensing fees and charges webpage.

**Application type:**  New  Renewal  Replacement  Amendment

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| 1. **Licence details** (renewal/amendment or replacement only) | | | | | | | | | | | | | | | | | | | | | | |
| Licence number: |  | Expiry date: | | | | |  | | | | | | | | | | | | | | | |
| 1. **Business details** | | | | | | | | | | | | | | | | | | | | | | |
| Company name: |  | | | | | | | | | ABN: | | |  | | | | | | | | | |
| Contact person: |  | | | | | | | | | | | | | | | | | | | | | |
| Postal address: |  | | | | | | | | | | | | | | | | | | | | | |
| Suburb: |  | | State: | |  | | | | | | Postcode: | | | | | |  | | | | | |
| Phone number: |  | | Mobile number: | | | | | |  | | | | | | | | | | | | | |
| Email address: |  | | | | | | | | | | | | | | | | | | | | | |
| 1. **Emergency contact person** | | | | | | | | | | | | | | | | | | | | | | |
| Is your emergency person the same as above? (If no, complete below) | | | | | | | | | | | | | No | |  | | | | Yes | |  | |
| Contact person: |  | | | | | | | | | | | | | | | | | | | | | |
| Phone number: |  | | | Mobile number: | | | |  | | | | | | | | | | | | | | |
| Email address: |  | | | | | | | | | | | | | | | | | | | | | |
| 1. **Usual depot location of vehicle** (must be a physical address in the Northern Territory) | | | | | | | | | | | | | | | | | | | | | | |
| Site name: |  | | | | | | | | | | | | | | | | | | | | | |
| Site address: |  | | | | | | | | | | | | | | | | | | | | | |
| Suburb: |  | | | State: | |  | | | | | | Postcode: | | | | | |  | | | | |
| 1. **Disclosure of information** | | | | | | | | | | | | | | | | | | | | | | |
| Have you ever been convicted or found guilty of any offence under the *Dangerous Goods by Road and Rail (National Uniform Legislation) Act* or Regulations in the Northern Territory, another State, and Territory or Commonwealth?  If yes, please provide details below | | | | | | | | | | | | | | No | |  | | | | Yes | |  |
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| 1. **Vehicle details** | | | | | | | | |
| For all vehicles to be included on the licence, the below details must be provided. | | | | | | | | |
| A self-assessment against the requirements of Chapter 6 of the Australian Dangerous Goods code, has been conducted for each tank forming part of or attached to a vehicle listed on this application and meets the relevant requirements of the Code. A record of the self-assessment has been maintained and is available for inspection by the relevant Authority if requested. | | | | | | | |  |
| **New/Renew/Amend** | **Vehicle manufacturer** | **Vehicle model** | **Vehicle registration number** | **State or Territory where vehicle is registered** | **Explosive UN number** | **Class/es of dangerous goods transporting** | **Quantity and unit**  **(KG, T, etc.)** | |
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| 1. **Receiving licence** | | | | | | | | | | | | | | | | | | |
| How do you wish to receive the licence? | | | | | | Post |  | | Email | | |  | | Collection | | | |  |
| 1. **Applicant declaration** | | | | | | | | | | | | | | | | | | |
| I do solemnly declare that the information in this application is true and correct to the best of my knowledge.  I consent to the Licensing 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** | | | | | | | | | | | | | | | | | | |
| Application is complete and signed | | | | | | | | | | | | | | | | |  | |
| Prescribed application fee (see [licensing fees and charges](https://worksafe.nt.gov.au/licensing-and-registration/licensing-fees-and-charges) page) | | | | | | | | | | | | | | | | |  | |
| **Privacy statement** | | | | | | | | | | | | | | | | | | |
| The Department of Attorney-General and Justice complies with the Information Privacy Principles scheduled to the *Information Act 2002.* | | | | | | | | | | | | | | | | | | |
| **Lodgement** | | | | | | | | | | | | | | | | | | |
| Complete applications 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 | | | | | | | | | | | | | | | | |
| **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:** [territorybusinesscentre@nt.gov.au](mailto:territorybusinesscentre@nt.gov.au) | | | | | | **Postal:** GPO Box 9800, Darwin, NT 0801 | | | | | | | | |
| **Payment details** | | | | | | | | | | | | | | | | | | |
| A fee is payable on lodgement of this application form. Payment can be made by:   * Cash (in person only); or * Cheque (made out to Receiver of Territory Monies); or * Credit card (Visa or MasterCard accepted in person or over the phone). Note: A staff member from the Territory Business Centre will contact you via phone for payment. | | | | | | | | | | | | | | | | | | |
| Payment date: |  | | | | Receipt number: | | |  | | | Amount paid: | | | | |  | | |