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| Use this form to update the details of an electrical contractor licence, including nominated persons on the licence, in accordance with the *Electrical Safety Act 2022*. If the company has undergone a change of name including the ACN and/or office bearers you must complete a new application for an electrical contractor licence.  For more information please visit the Electrical Licensing section of NT WorkSafe’s website. | | | | | | | | | | | | | | | | |
| 1. **Applicant details** (authorised contact person) | | | | | | | | | | | | | | | | |
| Surname | |  | | | | | | | | | | | | | | |
| Given name/s | |  | | | | | | | | | | | | | | |
| Phone number | |  | | | | | Mobile number | | | |  | | | | | |
| Email address | |  | | | | | | | | | | | | | | |
| 1. **Contractor licence details** | | | | | | | | | | | | | | | | |
| Contractor name | |  | | | | | | | | | | | | | | |
| Licence number | | C | ­ | | | Expiry date | | | | |  | | | | | |
| Select your current status below. | | | | | | | | | | | | | | | | |
| Partnership | | | |  | Company/Incorporated body | | | | | | | |  | | | |
| Association/Unincorporated body | | | |  | Sole Trader | | | | | | | |  | | | |
| 1. **Variation details** | | | | | | | | | | | | | | | | |
| Select the applicable change of status below. | | | | | | | | | | | | | | | | |
| Change to company / partnership details (complete 3.1) | | | | | | | | | | | | | | |  | |
| Change to Nominee / Nominees (complete 3.2) | | | | | | | | | | | | | | |  | |
| Company name change (complete 3.3) | | | | | | | | | | | | | | |  | |
| Adding or changing a trading name (complete 3.4) | | | | | | | | | | | | | | |  | |
| * 1. **Change to company/partnership details** | | | | | | | | | | | | | | | | |
| Business name (if applicable) | | | | |  | | | | | | | | | | | |
| ACN |  | | | | ABN | | | |  | | | | | | | |
| Business address | |  | | | | | | | | | | | | | | |
| Suburb | |  | | | | | | | | State |  | | | Postcode | |  |
| Is your postal address the same as the above? If no complete below. | | | | | | | | | | | | | | | | |
| Postal address | |  | | | | | | | | | | | | | | |
| Suburb | |  | | | | | | | | State |  | | | Postcode | |  |
| Contact details | | | | | | | | | | | | | | | | |
| Phone number | |  | | | | | Mobile number | | | |  | | | | | |
| Email address | |  | | | | | | | | | | | | | | |
| **Director 1/Partner 1 details** | | | | | | | | | | | | | | | | |
| Complete current director / partner details below, if more than two please photocopy and attach to the application. | | | | | | | | | | | | | | | | |
| Full name | |  | | | | | | | | | | | | | | |
| Position held | |  | | | | | | | | | | | | | | |
| Phone number | |  | | | | | | Mobile number | | | |  | | | | |
| Full name | |  | | | | | | | | | | | | | | |
| Position held | |  | | | | | | | | | | | | | | |
| Phone number | |  | | | | | | Mobile number | | | |  | | | | |
| **Director 2/Partner 2 details** | | | | | | | | | | | | | | | | |
| Full name | |  | | | | | | | | | | | | | | |
| Position held | |  | | | | | | | | | | | | | | |
| Phone number | |  | | | | | | Mobile number | | |  | | | | | |
| Full name | |  | | | | | | | | | | | | | | |
| Position held | |  | | | | | | | | | | | | | | |
| Phone number | |  | | | | | | Mobile number | | |  | | | | | |
| * 1. **Change to Nominee details** | | | | | | | | | | | | | | | | |
| **Outgoing Nominees details** | | | | | | | | | | | | | | | | |
| Complete outgoing nominee’s details below, if more than two please photocopy and attach to the  application. | | | | | | | | | | | | | | | | |
| Outgoing Nominee | | | | | | | | | | | | | | | | |
| Full name | |  | | | | | | | | | | | | | | |
| Licence number | | A |  | | | | | Expiry date | | |  | | | | | |
| Postal address | |  | | | | | | | | | | | | | | |
| Suburb | |  | | | | | | | | State |  | | | Postcode | |  |
| Phone number | |  | | | | | | Mobile number | | |  | | | | | |
| Outgoing Nominee 2 | | | | | | | | | | | | | | | | |
| Full name | |  | | | | | | | | | | | | | | |
| Licence number | | A |  | | | | | Expiry date | | |  | | | | | |
| Postal address | |  | | | | | | | | | | | | | | |
| Suburb | |  | | | | | | | | State |  | | | Postcode | |  |
| Phone number | |  | | | | | | Mobile number | | |  | | | | | |

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| Incoming Nominee 1 | | | | | | | | | | | |
| Complete incoming nominee’s details below, if more than two please photocopy and attach to the application. | | | | | | | | | | | |
| Full name |  | | | | | | | | | | |
| Licence number | A | |  | | | Expiry date | |  | | | |
| Postal address |  | | | | | | | | | | |
| Suburb |  | | | | | | State |  | | Postcode |  |
| Phone number |  | | | | | Mobile number | |  | | | |
| Nominee declaration | | | | | | | | | | | |
| * I accept nomination to the above listed contractor licence; and * I have a minimum of 2 years recent experience in performing and supervising electrical installation work; (i.e. a statutory declaration from employers stating work carried out, or copies of certificates of compliance that you have signed off as the tester of the work); and * I have completed the relevant approved electrical contractors course; OR * I have been a technical nominee on a contractor’s licence within the last 3 years (attach copy of licence) | | | | | | | | | | | |
| Nominee signature | |  | | | | | | Date |  | | |
| Incoming Nominee 2 | | | | | | | | | | | |
| Complete incoming nominee’s details below, if more than two please photocopy and attach to the application. | | | | | | | | | | | |
| Full name |  | | | | | | | | | | |
| Licence number | A | |  | | | Expiry date | |  | | | |
| Postal address |  | | | | | | | | | | |
| Suburb |  | | | | | | State |  | | Postcode |  |
| Phone number |  | | | | | Mobile number | |  | | | |
| Nominee declaration | | | | | | | | | | | |
| * I accept nomination to the above listed contractor licence; and * I have a minimum of 2 years recent experience in performing and supervising electrical installation work; (i.e. a statutory declaration from employers stating work carried out, or copies of certificates of compliance that you have signed off as the tester of the work); and * I have completed the relevant approved electrical contractors course; OR * I have been a technical nominee on a contractor’s licence within the last 3 years (attach copy of licence) | | | | | | | | | | | |
| Nominee signature | |  | | | | | | Date |  | | |
| * 1. **Change of company name** | | | | | | | | | | | |
| If you are changing the name of the company, a company/business extract must be attached showing updated details. | | | | | | | | | | | |
| Previous company name | | | |  | | | | | | | |
| New company name | | | |  | | | | | | | |
| Previous business name (if applicable) | | | | |  | | | | | | |
| New business name (if applicable) | | | | |  | | | | | | |

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| * 1. **Adding or changing a trading name** | | | | | | | | | |
| If you are adding a trading name to your current registration you must supply a current company/business extract showing the updated details. | | | | | | | | | |
| New trading name | | | |  | | | | | |
| Registration date | | | |  | | | | | |
| 1. **Director/Partner/Applicant declaration** | | | | | | | | | |
| I, | |  | | | | | | | |
| hereby apply to vary the details of an electrical contractor’s licence on behalf of the below company/partnership/myself. | | | | | | | | | |
| Company/Business name | | | | |  | | | | |
| And solemnly and sincerely declare that:   * All statements and information contained in this application are true and correct to the best of my knowledge by virtue of the *Oaths, Affidavits and Declarations Act 2010*; and * I have read and understood the information contained in this application and associated guidelines; and * I and my employees (if any) have been or will be informed that all electrical work in the Northern Territory must be performed in compliance with the *Electrical Safety Act 2022*, Wiring Rules (AS 3000) and Power & Water Corporation requirements; failure to do so can result in disciplinary proceedings under the *Electrical Safety Act 2022* or other Northern Territory legislation; and * I know that it is an offence to make a declaration that is false in any material particular. | | | | | | | | | |
| This declaration is made at (location) | | | |  | | on (date) |  | | |
| Applicant signature | | |  | | | | | | |
| **Note:** Under the *Oaths, Affidavits and Declarations Act 2010* a person wilfully making a false statement or altering a statement, in a statutory declaration is guilty of a crime and is liable to a penalty or imprisonment, or both. | | | | | | | | | |
| **Supporting documents checklist** | | | | | | | |
| Signed and completed declaration. | | | | | | |  |
| Brief letter of explanation regarding proposed variation and why it is required | | | | | | |  |
| Front and back copy of current photo ID for each person associated with the application attached. | | | | | | |  |
| Copy of current business name extract attached (if applicable). | | | | | | |  |
| Copy of ASIC extract attached (if a company). | | | | | | |  |
| List of any secretaries, managers and other executives (if applicable – company/partnership). | | | | | | |  |
| **Nominee requirements** | | | | | | | |
| Copy of current NT unrestricted electrical work licence attached. | | | | | | |  |
| Evidence of 2 years practical experience is attached. | | | | | | |  |
| Evidence of training certificates or proof of being a technical nominee on a contractor’s licence in last 3 years attached. | | | | | | |  |

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| **Disclaimer** | | | |
| The Electrical Safety Regulator and the Northern Territory Government respects and is committed to safeguarding the confidentiality and privacy of the information that it collects and handles, in accordance with the *Northern Territory Information Act 2002*.  You have been asked to provide personal information necessary for us to meet your application requirements. You do not have to provide your personal information but if you choose not to, this application will be incomplete and we will be unable to process it.  The information you provide will be accessible to NT WorkSafe and will only be used to provide a department service or program. We will not disclose your personal information to third parties unless, authorised or required by law to do so you have given us consent to share your personal information for a specific purpose.  You may request access to the personal information we hold about you. If you want more information about the Northern Territory’s privacy laws, please refer to the *Northern Territory Information Act 2002*, or the Office of the Information Commissioner NT. | | | |
| **Lodgement** | | | |
| Complete applications can be lodged in person, email or via post at a Territory Business Centre below: | | | |
| Darwin | Darwin Corporate Park, Ground Floor, Building 3, 631 Stuart Highway Berrimah | | |
| Katherine | Big Rivers Government Centre, 5 First Street | | |
| Tennant Creek | Barkly Business Hub, 63 Haddock Street | | |
| Alice Springs | Ground Floor, The Green Well Building, 50 Bath Street | | |
| 1800 193 111 | | [territorybusinesscentre@nt.gov.au](mailto:territorybusinesscentre@nt.gov.au) | 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. | | | |