This form is used to apply for certificate of compliance book and plates for gas work in accordance with Regulation 179 & 203 of the Dangerous Goods Regulations.

**Note:** If a representative is collecting certificate of compliance book and plates on behalf of a gasfitter they must complete section 4.

**Application fee:** $60.00 including GST

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| 1. **Current gasfitter licence details** | | | | | | | | | | | | | | | | | | | | | | | | |
| Licence number: |  | | | Expiry date: | | | | | | | | |  | | | | | | | | | | | |
| 1. **Gasfitter details** | | | | | | | | | | | | | | | | | | | | | | | | |
| Surname: |  | | | | | | | | | | | | | | | | | | | | | | | |
| Given names: |  | | | | | | | | | | | Date of birth: | | | | | | |  | | | | | |
| Residential address: |  | | | | | | | | | | | | | | | | | | | | | | | |
| Suburb: |  | | | | | | | | State: | | | | |  | | | | | | | Postcode: | | |  |
| Is your postal address the same as above? If no, complete below: | | | | | | | Yes | | | |  | | | | | No | | | |  | | | | |
| Postal address: |  | | | | | | | | | | | | | | | | | | | | | | | |
| Suburb: |  | | | | | | | State: | | | | | |  | | | | | | | | Postcode: | |  |
| Home number: |  | | | | | Mobile number: | | | | | | | |  | | | | | | | | | | |
| Email address: |  | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Book and plate requirements** | | | | | | | | | | | | | | | | | | | | | | | | |
| Number of books/plates required: | | |  | | | | | | | | | | | | | | | | | | | | | |
| **OFFICE USE ONLY - Certificate of compliance book serial numbers issued** | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Gasfitter representative (if applicable)** | | | | | | | | | | | | | | | | | | | | | | | | |
| Name and signature of representative who is authorised to collect book and plates on behalf of gasfitter | | | | | | | | | | | | | | | | | | | | | | | | |
| Representative name: | |  | | | | | | | | | | | | | | | | | | | | | | |
| Representative signature: | |  | | | | | | | | | | | | | Date: | | |  | | | | | | |
| 1. **Receiving gas book and plates** | | | | | | | | | | | | | | | | | | | | | | | | |
| How do you wish to receive the gas book and plates? | | | Post | | | | | | |  | | | | | | | Collection | | | | | |  | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **Gasfitter declaration** | | | | | | | | | | | |
| The information in this application is true and correct to the best of my knowledge. | | | | | | | | | | | |
| Gasfitter name: | |  | | | | | | | | | |
| Gasfitter signature: | |  | | | | | | Date: |  | | |
| **Checklist** | | | | | | | | | | | |
| Application is complete and signed | | | | | | | | | | |  |
| Prescribed application fee | | | | | | | | | | |  |
| Section 4 completed if gas book and plates are being collected by gasfitter’s representative (if applicable) | | | | | | | | | | |  |
| Copy of front and back of photo ID e.g.: drivers licence, passport, etc. | | | | | | | | | | |  |
| Copy of front and back of current NT gasfitting licence (if applicable) | | | | | | | | | | |  |
| Copy of front and back of current interstate gasfitting licence and AMR letter (if applicable) | | | | | | | | | | |  |
| **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 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:** [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: | | |  | |