This form is used to apply for certificate of compliance book for undertaking electrical work in the Northern Territory.

Please review NT WorkSafe Bulletin ‘Certificate of compliance – Electrical safety’ before utilising book.

**Note:** If a representative of an electrical contractor is collecting book(s) on behalf of an electrician they must complete section 4.

**Application fee:** $25.00 inc GST

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| 1. **Licence details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Contractor’s licence no: | | | | | **C:** | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Nominees licence no: | | | | | **A:** | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Electrician details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Business name: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Nominee’s name: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Business address: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Suburb: | | |  | | | | | | | | | | State: | | | | | | |  | | | | | | Postcode: | | | |  | |
| Is your postal address the same as above? (If no, complete below) | | | | | | | | | | | | | Yes | | | |  | | | | | No | | |  | | | | | | |
| Postal address: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Suburb: | | |  | | | | | | | | | | State: | | | | | | |  | | | | | | Postcode: | | | |  | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Work number: | | |  | | | | | | | Mobile number: | | | | | | | | | |  | | | | | | | | | | | |
| Email address: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Book requirements** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Number of books required: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **Office use only** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Certificate of compliance books serial numbers issued:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Electrical representative** (if applicable) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name and signature of representative who is authorised to collect books on behalf of electrician contractor | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Representative name: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| Representative signature: | | | | | | |  | | | | | | | | | | | | | | Date: | | | | |  | | | | | |
| 1. **Receiving book(s)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| How do you wish to receive the book(s)? | | | | | | | | | | | Post | | | |  | | | | | | | | | Collection | | | | |  | | |
| 1. **Electrical contractor declaration** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| The information in this application is true and correct to the best of my knowledge. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Electrician contractor name: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| Electrician contractor signature: | | | | | | | | |  | | | | | | | | | | | | Date: | | | | |  | | | | | |
| **Checklist** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Application is complete and signed | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| Payment of application fee | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| Section 4 completed if being collected by electricians contractors representative | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| Copy of front and back of electrical contractors licence | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| Copies of the Electrical Reform and Electrical Reform (Safety and Technical) Regulations may be accessed on the NT WorkSafe website | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Copies of the Electrical Safety publications including Information Bulletins may be accessed on the NT WorkSafe website | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| PowerWater Corporation rules, manuals and standard drawings may be downloaded free of charge by visiting <http://www.powerwater.com.au/about_us/publications> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Remember to contract the Customer Connections Officer’s at Power and Water Corporation on (08) 89245700 to obtain a Notice of Intention to book. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **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 Highway Berrimah 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 Street. | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Phone:** 1800 193 111 | | | | | | **Email:** [territorybusinesscentre@nt.gov.au](mailto:territorybusinesscentre@nt.gov.au) | | | | | | | | | | **Postal:** GPO Box 9800, Darwin, NT 0801 | | | | | | | | | | | | | | | |
| **Payment details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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: | | | | |  | | | |