Use this form to notify NT Worksafe of the construction or repair of a gas main, as required under Regulation 178 of the Dangerous Goods Regulations 1985.

NT WorkSafe must be notified no less than 7 days prior to commencement of work.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **Notification details** | | | | | | | | | | | | | | | | | | | | | | | | |
| Business name: | |  | | | | | | | | | | | | | ABN: | | | |  | | | | | |
| Contact person: | |  | | | | | | | | | | | | | | | | | | | | | | |
| Postal address: | |  | | | | | | | | | | | | | | | | | | | | | | |
| Suburb: | |  | | | | | | | State: | |  | | | | | | | Postcode: | | | | | |  |
| Phone number: | |  | | | | | | | Mobile number: | | | |  | | | | | | | | | | | |
| Email address: | |  | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Location or proposed location of gas mains** | | | | | | | | | | | | | | | | | | | | | | | | |
| Start date: | |  | | | | | | | | | | | | | | | | | | | | | | |
| Site name (if applicable): | | | |  | | | | | | | | | | | | | | | | | | | | |
| Address: | |  | | | | | | | | | | | | | | | | | | | | | | |
| Suburb: | |  | | | | | | State: | |  | | | | | | Postcode: | | | | | |  | | |
| 1. **Gasfitters details** | | | | | | | | | | | | | | | | | | | | | | | | |
| Gasfitters name: | | |  | | | | | | | | | Licence number: | | | | | | | |  | | | | |
| Address: | | |  | | | | | | | | | | | | | | | | | | | | | |
| Suburb: | | |  | | | | | | State: | |  | | | | | | Postcode: | | | | | |  | |
| Mobile number: | | |  | | | | Email address: | |  | | | | | | | | | | | | | | | |
| 1. **Attachments** | | | | | | | | | | | | | | | | | | | | | | | | |
| Full details of the construction work or repair work have been attached to this notification form | | | | | | | | | | | | | | | | | | | | |  | | | |
| 1. **Notifier declaration** | | | | | | | | | | | | | | | | | | | | | | | |
| I the undersigned person making this notification, hereby solemnly and sincerely declare that the information made in this notification and any attachments are true and correct in every particular.  I declare that the construction or repair of the gas main complies with the applicable Australian Standard. | | | | | | | | | | | | | | | | | | | | | | | |
| I have submitted this form electronically (signature is not required) | | | | | | | | | | | | | | | | | | | |  | | | |
| Notifier signature: | | | |  | | | | | | | | | Date: | | | | | | |  | | | |
| **Privacy statement** | | | | | | | | | | | | | | | | | | | | | | | |
| The Department of Attorney-General and Justice complies with the Information Privacy Principles scheduled by the *Information Act.* | | | | | | | | | | | | | | | | | | | | | | | |
| **Lodgement** | | | | | | | | | | | | | | | | | | | | | | | |
| Completed applications can be lodged in person, email or via post at a NT WorkSafe below: | | | | | | | | | | | | | | | | | | | | | | | |
| **Phone:** 1800 019 115 | | | | | **Email:** ntworksafe@nt.gov.au | | | | | | **Postal:** GPO Box 1722, Darwin NT 0801 | | | | | | | | | | | | |
| **In person:** Darwin Corporate Park, Building 3, 631 Stuart Highway, Berrimah NT | | | | | | | | | | | | | | | | | | | | | | | |