

Application for a replacement licence – Major hazard facility

This form is used to apply for a replacement major hazard facility licence in accordance with Regulation 594 of the [Work Health and Safety \(National Uniform Legislation\) Regulations 2011](#).

For the relevant application fee, visit the [Licensing fees and charges](#) webpage.

1. Licence holder details

Major hazard facility licence number:					
Company name:					
Trading name:		ABN/ACN:			
Contact person:		Position:			
Contact number:		Mobile number:			
Email address:					
Postal address:					
Suburb:		State:		Postcode:	

2. Reason for replacement

Lost	☐	Stolen	☐	Destroyed	☐
Describe how the licence was lost, stolen or destroyed:					

3. Receiving licence

How do you wish to receive the licence?	Post	☐	Email	☐	Collection	☐
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4. Applicant declaration

Section 268 of the WHS Act specifies that a person must not give information in complying or purportedly complying with the Act that the person knows to be false or misleading in a material particular; or omits any matter or thing without which the information is misleading. This section has a maximum penalty of \$10,000 for an individual and \$50,000 for a body corporate.			
The information in this application is true and correct to the best of my knowledge.			
I consent to the Work Health Authority making enquiries and exchanging information with WHS Regulators in other States, Territories or the Commonwealth regarding any matter relevant to this application.			
Applicant name:			
Applicant signature:		Date:	

Privacy statement

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	Building 3, Darwin Corporate Park, 631 Stuart Highway, Berrimah
Katherine	Big Rivers Government Centre, 5 First Street, Katherine
Alice Springs	Ground floor, The Green Well building, 50 Bath Street Alice Springs
Tennant Creek	Barkley Business Hub, 63 Haddock Street, Tennant Creek

Phone: 1800 193 111

Email: 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:	
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