

Application for WHS entry permit

This form is to be used for an official of the union to be issued with a Northern Territory Work Health and Safety (WHS) Entry Permit must be made by the relevant registered union (as per section 131(1) of the Work Health and Safety (National Uniform Legislation) Act (the Act)), by a union official with the authority to enter into arrangements on the union's behalf.

Incomplete applications cannot be processed. After a new applicant has satisfactorily completed the prescribed NT WorkSafe training, they will be required to enclose a statutory declaration to complete the application as per section 131(2) of the Act (training for new applicants is currently provided as a free service by NT WorkSafe). Applications for a subsequent entry permit must include a completed statutory declaration (attached). Additional attachments are specified below.

Note: Submission of this form constitutes agreement to have the entry permit holder name published on the NT WorkSafe website pursuant to section 151 of the Act: [Register of Current Work Health and Safety Entry Permit Holders](http://www.worksafe.nt.gov.au/SafetyAndPreventions/Pages/Entry-Permit-Holders.aspx) or <http://www.worksafe.nt.gov.au/SafetyAndPreventions/Pages/Entry-Permit-Holders.aspx>

Type of notification: New Subsequent application (tick reason)

Reason: Permit expired/expiring Card lost/damaged Other _____

1. Applicant details

Surname:			
Given names:			

2. Union details

Union name:			
Details of union official nominating person as a WHS Entry Permit Holder			
Surname:			
Given names:			
Union postal address:			
Suburb:	State:	Postcode:	
Phone number:	Mobile number:		
Email address:			

3. Additional requirements

Attached evidence that nominee is currently an official of the union	<input type="checkbox"/>
Attached current right of entry permit issued under the Commonwealth <i>Fair Work Act</i>	<input type="checkbox"/>
One clear, passport-size photograph not more than 6 months old.	<input type="checkbox"/>
SUBSEQUENT application only - Completed statutory declaration (page 3)	<input type="checkbox"/>

4. Receiving permit

How do you wish to receive the permit?	Post <input type="checkbox"/>	Collection <input type="checkbox"/>
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5. Applicant declaration

The information in this application is true and correct to the best of my knowledge.			
Applicant name:			
Applicant signature:	Date:		

6. Union representative declaration

The information in this application is true and correct to the best of my knowledge.

Union official name:

Union official signature:

Date:

7. 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 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

THE NORTHERN TERRITORY OF AUSTRALIA
STATUTORY DECLARATION

This statutory declaration is made in pursuance of S131-134 of the Northern Territory Work Health and Safety (National Uniform Legislation) Act.

1) Insert full name and address of person making declaration

I, (1)

solemnly and sincerely declare that I:

(2) Here insert name of union to complete the details of the matter being declared

- (a) am an official of the union (2)
- (b) have satisfactorily completed the Northern Territory entry permit training prescribed by the Regulator; and
- (c) hold, or will hold, an entry permit under the Fair Work Act at the point of exercising any right granted to a WHS entry permit holder under the Northern Territory *Work Health and Safety (National Uniform Legislation) Act*.

This declaration is true and I know it is an offence to make a statutory declaration knowing it is false in a material particular.

Declared at _____ the _____ day of _____ 20_____

(3) Signature of the person making the declaration

(3)

.....

(4) Signature of the person before whom the declaration is made

Witnessed by:

(4)

.....

(5) Here insert full name of person before whom the declaration is made, legibly written, typed or stamped

(5)

.....

(6) Here insert contact address or telephone number of person before whom the declaration is made

(6)

.....

NOTE: This declaration may be witnessed by any person who is at least 18 (eighteen) years of age.

NOTE: This written statutory declaration must comply with Part 4 of the Oaths Affidavits and Declarations Act.

NOTE: Making a declaration knowing it is false in a material particular is an offence for which you may be fined or imprisoned.