

Notification of demolition work

Use this form to notify demolition works in accordance with Regulation 142 of the Work Health and Safety (National Uniform Legislation) Regulations.

Demolition licences are not required in the Northern Territory under Regulation 143.

Refer to the guide [Demolition notification](#) for further information.

NT WorkSafe must be notified at least 5 days before the work commences.

1. Notification type (Select one)

Demolition of a structure, or part of a structure that is load bearing or otherwise related to the physical integrity of the structure, that is at least six metres in height	<input type="checkbox"/>
Demolition work involving load shifting machinery on a suspended floor	<input type="checkbox"/>
Demolition work involving explosives	<input type="checkbox"/>

2. Demolition business details

Person conducting a business or undertaking (PCBU) <input type="checkbox"/>		Emergency service <input type="checkbox"/>	
Business name:		ABN:	
Contact person:			
Contact number:		Mobile number:	
Email address:			
Address:			
Suburb:		State:	
		Postcode:	
Is your postal address the same as above? (If no, complete below)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Postal address:			
Suburb:		State:	
		Postcode:	

3. Demolition details

Start date:		End date:	
Address:			
Suburb:		State:	
		Postcode:	
Type of structure to be demolished including height:			
Machinery to be used in the demolition:			

4. Will explosives be used for the demolition

Yes (complete below) <input type="checkbox"/>	No (go to Q5) <input type="checkbox"/>
Contact person:	
Licence number:	
Expiry date:	
Which State, Territory or Commonwealth was the licence issued?	

5. Is the value of the demolition work greater than \$500,000

Yes (complete below) <input type="checkbox"/>		No (go to Q6) <input type="checkbox"/>	
Principle contractor name:			
Contact person:			
Phone number:		Mobile number:	

6. Is the demolition supervisor different to the principle contractor

Yes (complete below) <input type="checkbox"/>		No (go to Q7) <input type="checkbox"/>	
Contact person:			
Phone number:		Mobile number:	

7. Applicant declaration

The information in this notification is true and correct to the best of my knowledge. I consent to the Work Health Authority making enquiries and exchanging information with work health and safety regulators in other States, Territories or the Commonwealth regarding any matter relevant to this notification.			
I have submitted this form electronically (signature is not required)			<input type="checkbox"/>
Notifier 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, or 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

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: Building 3, Darwin Corporate Park, 631 Stuart Highway, Berrimah NT		