

Application for a high risk work licence

This form is used to apply for a high risk work licence in accordance with Regulation 81 of the Work Health and Safety (National Uniform Legislation) Regulations.

Please refer to the guide to high risk work licenses for further information.

Type of application:

New Renewal

Application fee:

New: \$76.00 Renewal: \$63.00

TBC use only
Licence no:
Person no:
<input type="checkbox"/> Photo on uncard
Date received:
Fee received: \$
Receipt no:
Received by (TBC staff name):

1. Applicant details

Surname:					
Given names:					
Date of birth:		Gender:	Male <input type="checkbox"/>	Female <input type="checkbox"/>	
Residential 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:	
Home number:		Mobile number:			
Email address:					

2. Residence location

The Work Health Authority must issue a high risk work licence to an applicant who resides in the **Northern Territory** or if residing outside the Northern Territory circumstances exist that justify the grant of the licence [Regulation 89(2)(c)]. A circumstance to justify the grant of a licence is for example **fly in/fly out** workers on a Northern Territory mine site.

Are you a fly in/fly out worker?	No <input type="checkbox"/>	Yes <input type="checkbox"/>
If No, continue with application form. If Yes, please supply the below contact information.		
Employer name:		
Contact person:		
Phone number:		

3. Classes of high risk work licence being applied for (tick all licence classes you are applying for)

Code	Crane and Hoist Operations		Office Use Only
CT	Tower Crane	<input type="checkbox"/>	Application No:
CS	Self-erecting Tower Crane	<input type="checkbox"/>	Application No:
CD	Derrick Crane	<input type="checkbox"/>	Application No:
CP	Portal Boom Crane	<input type="checkbox"/>	Application No:
CB	Bridge and Gantry Crane	<input type="checkbox"/>	Application No:
CV	Vehicle Loading Crane	<input type="checkbox"/>	Application No:
CN	Non-slewing Mobile Crane	<input type="checkbox"/>	Application No:
C2	Slewing Mobile Crane with a capacity up to 20 tonnes	<input type="checkbox"/>	Application No:
C6	Slewing Mobile Crane with a capacity up to 60 tonnes	<input type="checkbox"/>	Application No:
C1	Slewing Mobile Crane with a capacity up to 100 tonnes	<input type="checkbox"/>	Application No:
CO	Slewing Mobile Crane with a capacity over 100 tonnes	<input type="checkbox"/>	Application No:
WP	Boom-type Elevating Work Platform	<input type="checkbox"/>	Application No:
HM	Materials Hoist	<input type="checkbox"/>	Application No:
HP	Personnel and Materials Hoist	<input type="checkbox"/>	Application No:
PB	Concrete Placing Boom	<input type="checkbox"/>	Application No:
RS	Reach Stacker	<input type="checkbox"/>	Application No:
Code	Scaffolding Work		
*SB	Basic Scaffolding	<input type="checkbox"/>	Application No:
*SI	Intermediate Scaffolding	<input type="checkbox"/>	Application No:
*SA	Advanced Scaffolding	<input type="checkbox"/>	Application No:
Code	Dogging and Rigging Work		
*DG	Dogging	<input type="checkbox"/>	Application No:
*RB	Basic Rigging	<input type="checkbox"/>	Application No:
*RI	Intermediate Rigging	<input type="checkbox"/>	Application No:
*RA	Advanced Rigging	<input type="checkbox"/>	Application No:
Code	Pressure Equipment Operation		
BS	Standard Boiler Operation	<input type="checkbox"/>	Application No:
BA	Advanced Boiler Operation	<input type="checkbox"/>	Application No:
TO	Turbine Operation	<input type="checkbox"/>	Application No:
ES	Reciprocating Steam Engine Operation	<input type="checkbox"/>	Application No:
Code	Forklift Operation		
LF	Forklift Truck	<input type="checkbox"/>	Application No:
LO	Order Picking Forklift Truck	<input type="checkbox"/>	Application No:
*A High Risk Work Licence hierarchy is any group of classes that requires the entry level class prior to holding the higher level classes.			

4. Current licences relevant to the application

A person may not hold more than one high risk work licence at any time. When applying for a high risk work licence you must identify any existing high risk work licences.

If you hold any existing high risk work licences you will be required to surrender them prior to a new licence being issued.

Do you hold an equivalent high risk work licence in another State or Territory? Yes No
If yes, please provide details in below table.

Licence number	Type of licence i.e. forklift	State issued	Date of issue	Expiry date

Please note: earthmoving tickets (e.g. front end loader, grader) are not high risk categories and certificate of competency cards cannot be converted.

5. Licence renewals

Is your expiring licence issued by another WHS regulator? Yes No
If yes, please provide reasons for requesting the renewal in the Northern Territory:

I declare that I have maintained my competency to carry out the high risk work Yes No

* If no, an assessment report must accompany this application within 60 days of the report being issued.

6. Licence cancellation/suspension/refusal details

Have you ever been convicted or found guilty of any offence under the *Work Health and Safety (NUL) Act* or Regulations or under the Work Health and Safety (WHS) law of another State, Territory or the Commonwealth? (If yes, please provide details below) No Yes

Have you entered into an enforceable undertaking under the WHS Act or under the WHS law of another State, Territory or the Commonwealth? (If yes, please provide details below) No Yes

Have you ever had an equivalent high risk work licence under the WHS Act or Regulations or the WHS law of another State, Territory or the Commonwealth refused, or suspended or cancelled? (If yes, please provide details below) No Yes

Have you ever been disqualified from applying for a high risk work licence? (If yes, please provide details below) No Yes

7. Receiving licence

How do you wish to receive the licence? Post Collection

8. Declaration of applicant

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.

Name of applicant:			
Signature of applicant:		Date:	

Checklist

Licence requirements	New	Renewal
Application is complete and signed	<input type="checkbox"/>	<input type="checkbox"/>
Payment of application fee.	<input type="checkbox"/>	<input type="checkbox"/>
Evidence of competency training (HRW Licence Assessment Report) attached. Assessment reports dated more than 60 days from the assessment date will not be accepted.	<input type="checkbox"/>	N/A
A legible copy of photo ID i.e passport, drivers licence	<input type="checkbox"/>	<input type="checkbox"/>
One clear, passport size photograph no more than 6 months old. Alternatively photographs can be taken at any Territory Business Centre.	<input type="checkbox"/>	<input type="checkbox"/>
Current licenses – surrender of original licence if applicable.	<input type="checkbox"/>	<input type="checkbox"/>

Privacy statement

The Department of Attorney-General and Justice complies with the Information Privacy Principles scheduled to the *Information Act*.

Lodgement – Territory Business Centre

Incomplete applications cannot be processed and will be returned. Completed applications can be lodged in person, email or via post at a Territory Business Centre below:

Darwin	Katherine	Tennant Creek	Alice Springs
Darwin Corporate Park Building 3 631 Stuart Highway, Berrimah	Shop 1, Randazzo Building. 18 Katherine Terrace.	Shop 2, Barkly House Cnr Davidson and Patterson Street.	Ground Floor, The Green Well Building. 50 Bath Street
Phone address: 1800 193 111	Email address: territory.businesscentre@nt.gov.au		
Postal address: GPO Box 9800, Darwin, NT 0800			

Payment details

Payment method			
Cash - Territory Business Centre	<input type="checkbox"/>		
Cheque - payable to RTM (Receiver to Territory Money)	<input type="checkbox"/>		
Credit card	<input type="checkbox"/>		
Visa <input type="checkbox"/> MasterCard <input type="checkbox"/>			
Name on card:			
Credit card number:		Expiry:	
I hereby authorise the Territory Business Centre to debit the above credit card for the amount of			\$
Signature of cardholder:		Date:	