



Biosecurity & Product Integrity  
Chemical Services  
CS Robinson Building  
Berrimah Farm

GPO Box 3000  
DARWIN NT 0801  
Tel: 8999 2344  
Fax: 8999 2111

### APPLICATION FOR A 1080 USER AUTHORISATION

This application is made under the provisions of the *Agricultural and Veterinary Chemicals Control of Use Act* and Regulations.

This **1080 User Authorisation** will allow the holder to handle 1080 products in accord with the Act and a current **“Approval to Purchase a 1080 Chemical Product and Conduct 1080 Baiting Program”**.

Incomplete applications will not be processed until the required information is supplied.

Application forms are available from and completed forms to be sent to:

Chemicals Coordinator  
Department of Regional Development, Primary Industry, Fisheries & Resources  
PO Box 3000  
Darwin NT 0801  
Fax: (08) 8999 2111      Tel: (08) 8999 2344

#### PLEASE PRINT

APPLICANT DETAILS	
Name (print in full).....	
Date of Birth:.....	
Telephone: (h)..... (w)..... (fax).....	
Mobile Number:.....	Email Address:.....
Residential Address:.....	
Postal Address:.....	
Have you previously held an S7 or RCP authorisation	Yes <input type="checkbox"/> No <input type="checkbox"/> Authorisation No:.....
At what Address:.....	
Have you been convicted of an offence against this or related legislation in the Territory or another State?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If so, provide details:.....	
.....	
.....	

Do you have ChemCert or SMARTtrain level 3 accreditation or equivalent?

Yes

No

**Note:** If your accreditation has expired it must be renewed

Do you have a certificate of attainment for the 1080 User training course for the handling and use of registered chemical products containing sodium fluoroacetate?

Yes

No

If yes **please attach copy of both sides of your accreditation card plus a copy of the certificate of attainment**

Other relevant equivalent qualifications.....  
.....  
.....

Certificate No.:..... Expiry Date:.....

**DECLARATION**

**Read carefully before signing and dating**

I acknowledge that I have been given a copy of and read the “**Directions for Use of 1080 for Pest Animal Control**”.

I acknowledge that I must comply with all of the conditions and requirements specified in this document and the “**1080 User Authorisation**”.

I shall not possess or use a 1080 product on any property other than in accordance with to the “**Authority to Purchase a 1080 Chemical Product and Conduct 1080 Baiting Program**”.

I declare that all of the above information is true and correct.

Signature of applicant:..... Date:...../...../20.....

**Office Use Only**