

Agents Licensing Act

Agents Licensing Regulations

Notification of a New Company Director or Firm Partner

Regulation 22 requires written notice to be given to the Registrar of Land, Business and Conveyancing agents of a change of Company Director or change of Partner of a Firm. Notification **MUST** be accompanied by a testimonial, identification and evidence of lodgement of a criminal history check.

1. CORPORATION DETAILS		
Full name of corporation: <i>Please provide a copy of the current company extract</i>	Licence No:	
Registered Business Name in the Northern Territory :		
Details of the new Director(s) of the Company or Firm Partner(s). Please note that each new Director or Firm Partner is required to submit a Testimonial under section 4, identification and an Authority to Release Criminal History form with Northern Territory Police, unless the person is a Licensed Agent or a Registered Agent's Representative in the Northern Territory.		
Full Name	Date of Birth	Residential Address
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. IDENTIFICATION
The Agents Licensing Regulations requires a Director or Firm Partner to provide a certified copy of identification. Please attach a certified copy of your identification in the form of either:
<ul style="list-style-type: none"> a) An Australian or overseas passport which is current or expired within two years of Notification of the new Director or Firm Partner, or b) An Australian photographic Drivers Licence which is current or expired within two years of notification of the new Director or Firm Partner
Please attach a certified copy of your identification with this form

3. CRIMINAL HISTORY CHECK
The <i>Agents Licensing Act</i> requires a Director or Firm Partner to be a fit and proper person within the meaning of section 20 of the Act.
To assess a persons suitability, the persons is required to undergo a criminal history check through Northern Territory Police. The attached Authority to Release Criminal History Form must be completed and lodged at a police station. The form is required to be witnessed by an authorised officer being a Northern Territory Police, Fire and Emergency Services employee or an interstate/overseas Police Officer.
On lodgement of the form at a police station, the person will be required to produce identification (driver's licence/18+ card, birth certificate/extract, or passport) for photocopying and pay a \$30 fee for the name check.
Please provide evidence of the lodgement with this form.

4. TESTIMONIAL

A Testimonial is required to be completed and signed by an **AUTHORISED PERSON** (refer to notes below) in respect of each Director of the company or Firm Partner who is **not a licensed agent or a registered agent's representative**. Regulations 22(5), (6) & (7)

I, _____
(Full name)

of _____
(Business name and address)

declared that I have known _____
(Name of Director or Firm Partner)

for _____ year(s) and that in my opinion he/she is a person of good fame and character.

Signature: _____

Date: ____/____/____

Title: _____

TESTIMONIAL – AUTHORISED PERSON

The testimonial shall be signed by a person (who is not a relation) who has known the person to whom the testimonial relates for a period of not less than 12 months, who is any of the following:

- i. a person authorised by the *Oaths Act* to administer an oath for any purpose;
- ii. a Justice of the Peace;
- iii. a commissioner for declarations appointed by the Attorney-General of the Commonwealth under the *Statutory Declaration Act 1959* of the Commonwealth;
- iv. a legal practitioner;
- v. a member of the Northern Territory Police Force;
- vi. a bank manager;
- vii. a judge;
- viii. a magistrate;
- ix. a notary public;
- x. a Registrar appointed under the *Local Court Act*;
- xi. a master appointed under the *Supreme Court Act*
- xii. a commissioner for taking affidavits in the Supreme Court of a State or Territory;
- xiii. a licensed agent;
- xiv. a person registered or enrolled under the *Health Practitioners Act*, (eg. Medical Practitioner, Pharmacist, Dentist, Registered Nurse etc.)
- xv. a person registered as a teacher under the *Teaches Registration (Northern Territory) Act*;
- xvi. a person who holds an office, appointment or authority in a State or Territory equivalent to any of those specified in (i) to (xv).

The person completing the Testimonial **must not** be a relation as defined under Regulation 17(2) of the Agents Licensing Regulations and must have known the person to whom the testimonial relates for a period of not less than 12 months.

5. LODGEMENT

Please send completed Form and supporting documents to the following address:

**Property Agents Licensing
Licensing, Regulation and Alcohol Strategy
GPO Box 1154
DARWIN NT 0801**

Or send by Facsimile transmission to: **08 8999 1888**