

## LICENSING, REGULATION AND ALCOHOL STRATEGY

### Application under Mutual Recognition for Licence under *Commercial and Private Agents Licensing Act*

#### Class of Licence

I am currently seeking registration for the following categories under the *Commercial and Private Agents Licensing Act*:

- Commercial Agent (Refer to Point 1 in Notes to Application)
- Private Bailiff (Refer to Point 1 in Notes to Application)
- Inquiry Agent
- Process Server

#### 1. Applicant Details

Title (Mr, Ms, Mrs, Dr etc)

Surname

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Given Name(s)

Other names (including maiden name and alias(es))

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Street Address

Postcode

Postal Address

Postcode

Telephone

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Fax

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Mobile

--

Email

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#### LICENSING, REGULATION AND ALCOHOL STRATEGY

##### Darwin

Level 1, Enterprise House  
28-30 Knuckey Street, Darwin  
GPO Box 1154, Darwin, NT 0801  
Ph: 08 8999 1800  
Fax: 08 8999 1888

##### Katherine

18 Katherine Terrace, Katherine  
GPO Box 2138, Katherine, NT 0850  
Ph: 08 8972 8906  
Fax: 08 8972 8910

##### Alice Springs

1<sup>st</sup> Floor Belvedere House  
Cnr Parsons/Bath Sts  
GPO Box 8470, Alice Springs NT 0871  
Ph: 08 8951 5195  
Fax: 08 8951 8591

Proposed method of trade:	
<input type="checkbox"/> Sole Trader	Name:
<input type="checkbox"/> Partnership	Partner's Name:
<input type="checkbox"/> Employed By	Employer's Name: _____ Note: An interstate corporation must be licensed, provide licence number: _____

## 2. Business Details (or Name and Address of Employer)

Name of Business Manager (whether self or other natural person)

Business Address

Postcode

Telephone

Fax

## 3. Details of Current Equivalent Registration

Registration includes the licensing, approval, admission, certification (including by way of practising certificates), or any other form of authorisation, of a person required by or under legislation for the carrying on of an occupation.

State/Territory Currently Licensed With	Registration / Licence Number	Current
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No

#### 4. Disclosures and Declaration

Please complete the following questions. If you answer YES to any of the following questions, please provide full details on a separate sheet as an attachment.

1. Are there any conditions, limitations or restrictions which apply to you registration in any State or Territory of Australia?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Have you been the subject of disciplinary proceedings in any State (including any preliminary investigations or actions that might lead to disciplinary proceedings) in relation to those occupations?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Have you had your registration in any State cancelled or currently suspended as a result of disciplinary action?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Have you been prohibited from carrying on any such occupation in any State or Territory, and is not subject to any special conditions in carrying on that occupation, as a result of criminal, civil or disciplinary proceedings in any State or Territory?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5. Have you been the subject of any special conditions in carrying on any such occupation in any State or Territory?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

I, .....  
(full name of applicant)

give consent to the making of inquires of, and the exchange of information with, the authorities of any State or Territory regarding my activities in the occupation or occupations or otherwise regarding matters relevant to this notice.

Declared at .....this.....day of.....20.....

Signature of Applicant

Date

 /  / 

^Signature of Witness

Date

 /  / 

Full Name of witness (family name and given name)

^This declaration may be made before any person who has attained the age of (18) eighteen years.

## Authorisation of Payment By Credit Card

Authorisation for Payment by Credit Card	
<input type="checkbox"/> Bankcard	
<input type="checkbox"/> Visa	
<input type="checkbox"/> Mastercard	
Credit card number:	Expiry Date:
Name on card:	Contact Phone Number:

I hereby authorise the Territory Business Centre to debit my credit card for the amount of	
\$	Amount in words:
Signature of cardholder	
	Date
	/ /

## Notes to Application

### 1. Fees and Lodgement

A processing fee\* must accompany this application.

**Please note:** A bond is required only for commercial agent and private bailiff categories and proof of currency of the bond must be lodged with the application.

Once a licence has been approved, a granting fee\* is payable. You will be advised of the amount. The granting fee is payable when the licence is approved.

The application form, along with the applicable fees, attachments to application, supporting documentation etc., must be lodged at your nearest Territory Business Centre.

### 2. Applications

The Commissioner will only receive and consider complete applications.

A person wilfully making a false statement in a statutory declaration is liable to a penalty of \$2000 or imprisonment for 12 months or both.

### 3. Identification

Please attach a certified copy of your identification in the form of either:

- (a) An Australian or overseas passport which is current or expired within two years
- (b) An Australian photographic Drivers Licence which is current or expired within two years

### Applicant Checklist

Processing of your application will be delayed if you have not completed the checklist.

<input type="checkbox"/> Have you completed all sections of the application?
<input type="checkbox"/> If applying for a commercial agent or private bailiff licence, have you included a proof of currency of your bond?
<input type="checkbox"/> Have you included a document that is either the original or a copy of the instrument evidencing your existing registration (or, if there is no such instrument, by sufficient information to identify you and your registration)
<input type="checkbox"/> Have you included the instrument evidencing your existing registration; you must certify in the notice that the accompanying document is the original or a complete and accurate copy of the original.
<input type="checkbox"/> Have you included a copy of your interstate licence?
<input type="checkbox"/> Have you signed and dated the Declaration in section 4?
<input type="checkbox"/> Have you included a copy of your current identification?
<input type="checkbox"/> Have you included payment of the applicable fee or completed the credit card section?

### For Office Use Only

Document lodged by:

Name	
Postal Address	
Telephone	

Date of advertisement:	Fees paid:	Receipt Number
/ /		
Officer	Email	

## Notice In Accordance with the Information Act (Information Privacy Principle 1)

Licensing, Regulation and Alcohol Strategy (LRAS – a division of NT Department of Justice) is seeking information from you for the purposes of your application.

Information Privacy Principle 1 (IPP 1) requires that a public sector organisation must not collect personal information unless the information is necessary for one or more of its functions or activities. If personal information about an individual is collected from the individual, the organisation must take reasonable steps to ensure that the individual is aware of certain matters. For the purposes of IPP 1, the following advice is provided.

- a) You are able to access your personal information that you have provided by making a written request to the Director of Licensing.
- b) The information is required pursuant to the *Commercial and Private Agents Licensing Act*. The *Act* requires that certain matters must be considered when deciding whether or not to approve an application.
- c) The information will be kept confidential except as follows:
  - i. Information may be sought from Police, government agencies, interstate licensing authorities, or referees or other persons nominated by you. Information may be released to those sources to the extent necessary to verify information about you and your application.
  - ii. If a hearing is involved, information will be released to the parties, Commission or the Court, as required by the *Act*.
  - iii. Registers of licences and permits will be maintained and may be made available to the public on request.
- d) You do not have to provide information if you do not wish to do so. However, an application may not be approved if there is insufficient information to properly determine the matter in accordance with the *Act*.

Website: [www.nt.gov.au/justice/licenreg](http://www.nt.gov.au/justice/licenreg)

*\*Please refer to the relevant schedule of fees.*

### TERRITORY BUSINESS CENTRES

TOLL FREE LINE: 1800 193 111 (Australia Wide)

<b>Darwin</b>	<b>Katherine</b>	<b>Tennant Creek</b>	<b>Alice Springs</b>	<b>Postal Address</b>
Development Hse 76 The Esplanade Darwin NT 0800 Phone: (08) 8982 1700	1 Randazzo Bldg 18 Katherine Tce Katherine NT 0850 Phone: (08) 8972 8906	Shop 2, Barkly Hse Cnr Paterson & Davidson Sts Tennant Creek NT 0860 Phone: (08) 8962 4411	Peter Sitzler Bldg 67 Nth Stuart Hwy Alice Springs NT 0870 Phone: (08) 8951 8524	GPO Box 9800 Darwin NT 0801 <a href="http://territory.businesscentre@nt.gov.au">territory.businesscentre@nt.gov.au</a>

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