



Business trading name(s) registered for purpose of carrying on business as a travel agent

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Business name(s)

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Date Business registered

Date Business name(s) registered

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Postal address

Postcode

Registered office address

Postcode

Address(es) where you will carry on business as a travel agent:


The following section pertains to details of each Director or other persons concerned in the management of the corporation.

Surname	Given Name(s)		
Place of birth	Date of Birth	Position held	
Street Address			
Postcode			







## Disclosures

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

With respect to any person included in this application:

1. Has he or she ever been convicted, fined or disqualified by a Court, Tribunal, Board or other Authority in respect of any business or other dealings in the Northern Territory or elsewhere or been a member of a company so dealt with?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. By what other name(s) is he or she known, or has been known?  _____		
3. Has he or she been convicted of an offence(s) involving fraud or dishonesty in the 10 years preceding the date of application? If yes, provide relevant date(s), jurisdiction(s) and sentence(s) on separate sheet.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Has he or she been declared bankrupt or assigned his or her estate for the benefit of this or her creditors? If yes, provide date(s) and jurisdiction(s) on separate sheet.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5. Has he or she held a position as secretary or director in a company which has been wound up or placed under a receiver or official manager, or which has entered into a scheme of arrangement with its creditors?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

## Declaration

I/We hereby declare that to the best of my/our knowledge the particulars furnished for the purpose of obtaining a licence under the *Consumer Affairs and Fair Trading Act* are true and correct in every detail.

Signature\*

Date

 /  / 

Signature\*

Date

 /  / 

\*To be signed by no less than two directors

## Fees and Lodgement

Payment must be lodged through Territory Business Centres (TBC), either by mail or in person.

<b>Authorisation for Payment by Credit Card</b>	
<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
	/ /

*\*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="mailto:territory.businesscentre@nt.gov.au">territory.businesscentre@nt.gov.au</a>

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