



Form R004: Gasfitting Permit Renewal Application

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This form is designed to be used with the **FREE Adobe Acrobat Reader application**. [Click here to download Acrobat Reader.](#) Alternatively the form can be printed and completed by hand, scanned and submitted (with all attached documents).

You may lodge your completed application:

By post addressed to:
Licensing Services
Department of Mines, Industry Regulation and Safety
Locked Bag 100,
EAST PERTH WA 6892

In person at:
Customer Service
Level 1, Mason Bird Building
303 Sevenoaks Street
CANNINGTON
Hours: 8:30am to 4:30pm
Monday to Friday

Enquiries Only
Telephone: (08) 6251 2963
Email: gaslicensing@dmirs.wa.gov.au

Permit holder details

Title:

Family name:

First name:

Other name(s):

Date of birth:

Permit No:

Contact details

Note: Ensure your address and contact details are up to date. To update your detail go to: www.dmirs.wa.gov.au/notify

Phone (home):

Phone (work):

Phone (mobile):*

Email:*

***Required to receive courtesy renewal reminder notifications via SMS and email and other important information.**

Declaration by applicant

Section 13A(10) of the Gas Standards Act 1972 makes it an offence for a person to:

- falsify any matter relating to an application;
- provide any document or other evidence in support of the application that is forged, false, fraudulent or wrongfully represented as pertaining to the applicant;
- make a false statement in this declaration; or
- give a false testimonial to any person in connection with this application.

By signing this declaration, you give consent to the Director of Energy Safety and duly authorised officers to make enquiries and to receive and disclose any information for the purpose of determining this application.

Declaration

I (FULL NAME OF APPLICANT)

1. authorise the Director of Energy Safety, duly authorised officers of the Department of Mines, Industry Regulation & Safety or persons acting on behalf of the Department to make enquiries considered necessary to assess this application. I agree that the Department can use any or all information received pursuant to this authority for the purposes of the assessment or audit of this application; and
2. sincerely declare that this application is true and correct.

Signature:

This declaration is considered to be made on the date the application is submitted.

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Payment details

Credit card details remain confidential. Payment will appear as **"WA Gov – DMIRS"** on your bank statement.

Renewal fee for One year OR Five years
Cheque enclosed (made payable to Department of Mines, Industry Regulation and Safety)

Credit Card payment Visa Mastercard

Card Number

Card Holder

Expiry Date

I authorise the Department to deduct the current prescribed fee, including any applicable late fee.
Fees are subject to change on 1 July each year.

Cardholder's Signature:

Date:

Cardholder's contact phone number: