

RENEWAL APPLICATION Electrician or Restricted Electrical Licence

You may lodge your renewal application:

By post addressed to:

In person at:

Licensing Services

Customer Service

Department of Mines, Industry

Level 1, Mason Bird Building

Regulation and Safety Locked Bag 100, EAST PERTH WA 6892 303 Sevenoaks Street CANNINGTON

Hours: 8:30am to 4:30pm Monday to

Friday

Enquiries

Telephone: (08) 6251 2000 www.dmirs.wa.gov.au

Please print neatly in BLOCK LETTERS with a black or blue pen only	
Licence Details	Title:
Residential address	*Required for publication on the Register. Cannot be a PO Box. Street: State: Postcode:
Postal address*	As above *Address for correspondence from the Department Street: Suburb: State: Postcode:
Contact details	Home Phone: Work Phone: Mobile Phone*: Email*: *Required to receive courtesy renewal reminder notifications via SMS and email and other important information related to your licence

Regulation 59 of the Electricity (Licensing) Regulations 1991 makes it an offence for a person to: Declaration falsify any matter pertaining to an application; Licence provide any document or other evidence relating to qualifications or experience that is forged, false or holder to sign fraudulent; and date provide any document in support of an application that is wrongfully represented as pertaining to the applicant; or give a false testimonial in connection with this application. By signing this declaration, you give consent to the Electrical Licensing Board, duly authorised officers of the Department of Mines, Industry Regulation and Safety or persons acting on behalf of the Board or the Department to make enquiries and to receive and disclose any information for the purpose of determining this application. **Declaration** Full name of applicant authorise the Electrical Licensing Board, the Department of Mines, Industry Regulation and Safety or persons acting on behalf of the Board or the Department to make enquiries considered necessary to assess this application. My general consent includes the specific consent to the acquisition of copies of my criminal records. I agree that the Board can use any or all information received pursuant to this authority for the purposes of the assessment or audit of this application. 2 sincerely declare that this application is true and correct. Date Signature **Credit card** Payment Details (Payment will appear as "WA Gov – DMIRS" on your bank statement) details Visit our <u>Building and Energy Fee Schedule</u> page for current application and registration fees. remain confidential \square Registration fee for \square one year OR \square five years. ☐ Cheque enclosed (made payable to Department of Mines, Industry Regulation and Safety) ☐ Credit Card payment ☐ MasterCard Card Number _____ / ____ / ____ / ____ Expiry Date (PLEASE PRINT) 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: ___ **OFFICE USE ONLY** Licence No: **Department Code** Chart ☐ Registration Fee Description □ RE **Total Due** Link Licence to \$ Yes payment