



Restoration of Name to the Electrical Licensing Register (Electrical Contractors Licence)

All required information is to be submitted for this application to be accepted	Application Checklist – Please check Check this application has the following: Electrical Contractors Licence holders <input type="checkbox"/> Licence holder and contact details completed. <input type="checkbox"/> A Certificate of Currency issued/printed within the last 30 days for a civil (public) liability in the name of the applicant and if applicable the Trading Name. <input type="checkbox"/> Management representative details, including evidence of completion of the business modules of the electrical contractor training program. <input type="checkbox"/> Nominee details, including evidence of completion of the nominee modules of the electrical contractor training program. <input type="checkbox"/> Declaration completed. <input type="checkbox"/> A non-refundable restoration fee. <input type="checkbox"/> Renewal fee.			
Credit card details remain confidential	Payment Details (Payment will appear as “WA Gov – DMIRS” on your bank statement) <input type="checkbox"/> Cheque enclosed (made payable to Department of Mines, Industry Regulation and Safety) <input type="checkbox"/> Credit Card payment <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa Card Number _____ / _____ / _____ / _____ Expiry Date <input type="text"/> / <input type="text"/> Cardholder's Name: _____ (PLEASE PRINT) <i>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.</i> Cardholder's Signature: _____ Date: _____ Cardholder's contact phone number: _____			
OFFICE USE ONLY				
Licence No:	Department Code	EC <input type="checkbox"/>	Chart Description	<input type="checkbox"/> Restoration Fee <input type="checkbox"/> Renewal Fee – 1 year
Total Due	\$	Link Licence to payment	Yes	

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 2000

Email (**Do Not Email Form**)
energylicensing@dmirs.wa.gov.au

Internet: www.energysafety.wa.gov.au

PLEASE NOTE INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

Please ensure you have provided all required information and supporting documentation as per the application checklist. Failure to submit a completed application may result in the cancellation of your application and loss of the application fee.

	Please print neatly in BLOCK LETTERS with a black or blue pen only
Electrical contractor's licence to be restored	Licence No. EC _____
Entity type:	Details of Licence Holder
	Please indicate the entity type (select one only):
Individual →	<input type="checkbox"/> Individual (Sole trader)
	Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other
OR	Surname: _____
	Given Names: _____
	Date of Birth: _____
	OR
Partnership →	<input type="checkbox"/> Partnership
	Partnership name: _____
	Business/Trading Name: _____
OR	OR
Company →	<input type="checkbox"/> Body corporate (Pty Ltd Company)
	Body corporate name: _____ ACN: _____
	Business/Trading Name: _____
Principal place of business* address	<i>*Required for publication on the register. Cannot be a PO Box.</i>
	Street: _____
	Suburb: _____ State: _____ Postcode: _____
Address for service*	<input type="checkbox"/> As above <i>*Required for the purpose of serving documents.</i>
	Street: _____
	Suburb: _____ State: _____ Postcode: _____
Postal address*	<input type="checkbox"/> As above <i>*Address for correspondence from the Department.</i>
	Street: _____
	Suburb: _____ State: _____ Postcode: _____
Contact details	Home Phone: _____ Work Phone: _____
	Mobile Phone*: _____
	Email*: _____
	<i>*Required to receive courtesy renewal reminder notifications by SMS and email and other important information related to your licence</i>

<p>Insurance</p>	<p>Requirement for insurance</p> <p>Regulation 36(1)(a)(iv) requires that an electrical contractor must hold with a reputable insurer a current policy of insurance against civil liability, in respect of the work of an electrical contractor that complies with the requirements specified by the Board.</p> <p>Please provide:</p> <p><input type="checkbox"/> A Certificate of Currency issued/printed within the last 30 days for a civil (public) liability insurance. including the Legal Entity Name and if applicable the Trading Name.</p> <p><i>(e.g. for a sole trader "Joe Citizen trading as Citizens Electrical Service" or for a corporate body "ABC Contracting Pty Ltd trading as ABC Electrical".)</i></p>
<p>Management Representative</p>	<p>Management representative undertaking as to duties and responsibilities imposed on electricians and electrical contractors</p> <p>At least one natural person concerned in the management or conduct of the business of the licensed electrical contractor must understand fully the duties and obligations imposed on electricians and electrical contractors by the <i>Electricity Act 1945</i>, the <i>Electricity (Licensing) Regulations 1991</i>, the <i>Energy (Operators) Powers Act 1979</i> and regulations and the <i>Energy Coordination Act 1994</i> and regulations.</p> <p>The management representative must have also completed the following modules of the electrical contractor training program:</p> <ul style="list-style-type: none"> • General Legislative Requirements; and • Establishing a Contracting Business <p>Please indicate the name of the Management Representative who complies with the above requirements:</p> <p>Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other</p> <p>Surname: _____</p> <p>Given Names: _____</p> <p>Date of Birth: _____</p> <p>Please attach:</p> <p><input type="checkbox"/> Evidence of successful completion of the Business modules of the electrical contractor training program issued by an Approved Registered Training Organisation within the last five years.</p> <p>Note: <i>Where the person concerned in the management or conduct of the business has not been a Management Representative on a WA Electrical Contractor's Licence within the past five years, or has not completed the training within the past five years, they will be required to enrol in and complete successfully this part of the Electrical Contractors Training Program.</i></p>

Nominee

Nominee – holder of an Electrician’s Licence

Regulation 36(1)(a)(i) of the Electricity (Licensing) Regulations 1991 requires that the electrical contractor licence holder, or at least one person in the **employ** of the licence holder, is the holder of a current Western Australian Electrician’s Licence.

Please provide the nominee (holder of a WA Electrician’s Licence) details:

A electrical contractor operating as a sole trader may be the nominee, or may employ another eligible person who holds an electrician’s licence as nominee.

Nominee 1

Title: Mr Mrs Ms Other

Surname: _____ Given Names: _____

Date of birth: _____ / _____ / _____

Signature of Nominee 1: _____

***Note:** If the nominee is not the same person as previously nominated on the licence being restored, you will be required to download, complete and submit a Form 007 – ‘Application to register a Nominee’ in support of this application for restoration, and pay the appropriate fee.*

Nominee 2 (if applicable)

Title: Mr Mrs Ms Other

Surname: _____ Given Names: _____

Date of birth: _____ / _____ / _____

Signature of Nominee 2: _____

If you wish to nominate more than two nominees, please make copies of the above template and attach to the application.

**Proof of
Nominee
employment**

Sole trader

Is the nominee the same person as the applicant for electrical contractor licence restoration?

YES NO

If No – please confirm that the nominee is employed by the EC licence holder by completing the below declaration.

Partnership

Is the nominee an individual partner of the firm applying for electrical contractor licence restoration?

YES NO

If No – please confirm that the nominee is employed by the EC licence holder by completing the below declaration.

Body corporate

The nominee must be employed by the company applying for electrical contractor licence restoration. Please confirm that the nominee is an employee of the company applying for EC restoration by completing the below declaration.

Declaration

I

Name of applicant

sincerely declare that the nominee is to be employed by the applicant for electrical contractor licence and that the nominee terms and conditions of employment stipulate compliance with regulations 51, 52, 52B, 52BA and 52C of the Electricity (Licensing) Regulations 1991.

Signature

Date

<p>Nominee training</p>	<p>Regulation 36(1)(a)(iii) further requires that the Nominee has completed the following modules of the electrical contractor training program:</p> <ul style="list-style-type: none"> • Operation (Electrical) Legislative Requirements; and • Electrical Requirements. <p>Note: Where the Electrician has not been a nominee on a WA Electrical Contractor's Licence or a WA In-House Electrical Installing Work Licence within the past two years, or has not completed the training within the past two years, they will be required to enrol in and successfully complete the Nominee modules of the Electrical Contractors Training Program.</p>
<p>Declaration Licence holder to sign and date</p> <p>Individual licence holder →</p> <p>Company/ Partnership licence holder →</p>	<p>Regulation 59 of the Electricity (Licensing) Regulations 1991 makes it an offence for a person to:</p> <ul style="list-style-type: none"> • falsify any matter pertaining to an application; • provide any document or other evidence relating to qualifications or experience that is forged, false or fraudulent; • 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. <p>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.</p> <p>Declaration</p> <p>I _____</p> <p>Name of individual licence holder</p> <p style="text-align: center;">OR</p> <p>Executed for and on behalf of: _____</p> <p>In accordance with Section 127 of the <i>Corporations Act 2001</i> Name of partnership / Name of company</p> <p>1 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; and</p> <p>2 sincerely declare that this application is true and correct.</p> <hr/> <p>Signature _____ Date _____</p>

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