



Renewal application for an unrestricted asbestos licence

Occupational Safety and Health Act 1984
Occupational Safety and Health Regulations 1996

Method of payment

TAX INVOICE: WorkSafe Western Australia ABN 47 908 572 641

(Note: Unrestricted Asbestos Licence fees are GST exempt under Division 81 Determination New Tax System [GST Tax] {Exempt taxes and fees and charges} Determination 2000 No 3).

CREDIT CARD PAYMENT DETAILS

(Payment will appear as "WA Gov – DMIRS" on your bank statement)

Card Type Visa Mastercard (Only Visa and Mastercard accepted)

Card Number

Card Holder Please print

Expiry Date / *I authorise the Department to deduct the current prescribed fee**

Signature / Authorisation Date

Cardholder's contact phone number:

*Fees are subject to change on 1 July of each year

You may lodge your completed application:

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

In Person:
Department of Mines, Industry Regulation and Safety
Level 1, Mason Bird Building
303 Sevenoaks Street, Cannington
Opening hours: 8.30am - 4.30pm, Monday to Friday
Enquiries: 1300 307 877

OFFICE USE ONLY					
Total Fee	\$	Department Code	WL	Chart Description	Unrestricted asbestos renewal

Please ensure your application is received by the Department no later than 30 days after the licence expires or you will need to reapply by completing the 'new application for an unrestricted asbestos licence' form.



Renewal application for an unrestricted asbestos licence

1. Unrestricted asbestos licence details

Licence number

2. Applicant details

Name of Registered Company

Australian Company Number (ACN)

Trading Name (if applicable)

Company address

Postal address (if different to
business address)

Mobile phone no

Phone no. (day)

()

Email address

3. Competent person

Family name

Given name(s)

Date of birth

Place of birth

Address

Position in Company

Starting Date of Employment

Previous Employer (if employed less
than twelve months)

Mobile phone no

Phone no. (day)

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Email address

4. Relevant information (Please answer 'Yes' or 'No' to the following)

1. Have you/the Directors of the company or the nominated competent person been convicted under the *Occupational Safety and Health Act 1984*, or associated regulations in the five (5) years preceding this application?

Yes: No:

If yes, give details:

2. Have you/the Directors of the company or the nominated competent person ever had a licence application refused?

Yes: No:

If yes, give details:



3. Have you/the Directors of the company or the nominated competent person ever had a reportable injury (including employees) according Occupational Safety and Health Regulations 1996?

Yes: No:

If yes, give details:

4. Have you/the Directors of the company or the nominated competent person received any prohibition notices?

Yes: No:

If yes, give details:

5. Are the Directors of the company or the nominated competent person involved in any pending or current legal action?

Yes: No:

If yes, give details:

5. Declaration

- I hereby make an application for an unrestricted asbestos licence under Regulation 5.44 of the Occupational Safety and Health Regulations 1996 and declare that the information contained in this application and all supporting documentation is true and correct.
- I understand that relevant enquires will be made in relation to this application.
- I accept and agree to comply with all the conditions imposed on the unrestricted asbestos licence for which I have applied.

Individual / Company Director

Family name		Given name(s)	
Signature		Date	

Nominated Competent Person (Part 2)

Family name		Given name(s)	
Signature		Date	



6. Checklist

Incomplete applications cannot be accepted and will be returned to you. Please tick the appropriate boxes before submitting your application:

- Completed and signed application form (including the names and contact information of two referees)**
- Application fee - *This fee is non-refundable***
- Sign and return the provided conditions**
- Certified copies of the Competent Person's primary and secondary identification.** Copies of identification documents need to be certified as true copies by an authorised witness [Department of Justice guidelines](#).

Once your application has been approved and your licence has been granted, your details will be added to the public list on our website.

The Department will send courtesy reminders to renew licences via SMS and email only. Please ensure your contact details are kept up to date or you may not receive renewal reminders.



UNRESTRICTED ASBESTOS LICENCE CONDITIONS

Unrestricted Asbestos Licences are issued subject to the following conditions:

1. The licence holder must give the WorkSafe Western Australia Commissioner seven (7) days prior notification, in the 'approved form' of the commencement date to remove friable asbestos material from a building or structure.
2. The licence holder must keep a copy of the notification referred to in Condition one (1) for a minimum period of five (5) years.
3. The licence holder must keep a copy of the Safe Work Method Statement/Asbestos Removal Control Plan, as required by the Code of Practice for the Safe Removal of Asbestos – 2nd Edition [NOHSC: 2002 (2005)], for each asbestos removal job, for a minimum period of five (5) years.
4. The licence holder must keep a copy of the asbestos Clearance Certificate issued by a competent person, as required by the Code of Practice for the Safe Removal of Asbestos – 2nd Edition [NOHSC: 2002 (2005)], for each asbestos removal job, for a minimum period of five (5) years.
5. The licence holder must keep a copy of the receipt/s issued by the waste disposal facility, to which asbestos material is disposed, for a minimum period of five (5) years.
6. If the engagement of the nominated competent person is ceasing, the licence holder must notify the Commissioner within 14 days of the engagement ceasing. In the event of the engagement ceasing, the licence holder must apply to the Commissioner for approval of another nominee, within 14 days of the expiry of the engagement.

DECLARATION OF HOLDER OF UNRESTRICTED ASBESTOS LICENCE

This form **must be signed by the competent person**. This is a person who is authorised to sign documents and is responsible for the overall Unrestricted Asbestos removal work.

.....
(print name of the competent person of Unrestricted Asbestos licence)

accepts and agrees to comply with the conditions listed above and understands that a conviction against the *Occupational Safety and Health 1984* or *Occupational Safety and Health Regulations 1996* or non-compliance with any of the conditions listed above or an inability to comply with any of these may result in the Unrestricted Asbestos Licence being suspended or cancelled.

Signature: **Date:**

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