

Renewal Contractor Licence Application for Plumbing, Electrical and Gas-fitting

Occupational Licensing Act 2005

	SERVICE TASMANIA (office use only)	
	Product Code: OCCLIC	Primary Occupation:
	Licence No: Expiry Date:	Secondary Occupation/s:

SECTION A

All Plumbing Contractors must complete this section.

Please tick the applicable option, to ensure the correct fee is selected for your Plumbing Contractor licence.

Primary Occupation:

- Plumbing contractor self-employed with no other practitioners 1 year licence
- Plumbing contractor self-employed with no other practitioners 3 year licence
- Plumbing contractor employs 2 - 4 practitioners 1 year licence
- Plumbing contractor employs 2 - 4 practitioners 3 year licence
- Plumbing contractor employs 5 - 9 practitioners 1 year licence
- Plumbing contractor employs 5 - 9 practitioners 3 year licence
- Plumbing contractor employs 10+ practitioners 1 year licence
- Plumbing contractor employs 10+ practitioners 3 year licence
- Plumbing contractor aged over 65 years, self-employed and with no other practitioners 1 year licence
- Plumbing contractor aged over 65 years, self-employed and with no other practitioners 3 year licence

DO NOT USE THIS FORM IF THERE HAS BEEN A CHANGE IN ENTITY OR OWNERSHIP OF THE BUSINESS - Contact Building Standards and Occupational Licensing

Type of Entity Sole Trader Partnership Company Other (Specify) _____

If any of the business details have changed, please indicate below:

Business Details

Company Name: _____

Company ACN: _____

Business or Trading Name: _____

Business ABN: _____

Business Telephone Number: _____

Mobile Number: _____

Email Address: _____

Fax Number: _____

Business Address: _____

Postal Address: _____

Nominated Manager Details

If the Nominated Manager details have changed, please indicate below:

Surname: _____
Given Name: _____
Middle Name: _____
Date of Birth: _____
Licence Number: _____
Practitioner Licence Expiry Date: _____

If the Nominated Manager has changed, you **MUST** also complete a Change of Nominated Manager Form available at www.justice.tas.gov.au

Insurance Details

All contractors **MUST** hold current insurance covering liability for personal injury and damage to property for an amount of at least \$5,000,000.00 for any one occurrence in respect of Public Liability and in the annual total in respect of Products Liability. The business/company/sole trader name applying for the Contractor Licence **MUST** be an Insured Party.

Insurance Company Name _____ Insurance Policy Number _____
Insurance Policy Period of Cover Start Date _____ Insurance Policy Period of Cover End Date _____
Names of Insured Parties _____

Please answer the following questions *Prescribed work is defined under the Occupational Licensing Act 2005.*

Since your last application, has the company/business or the owner(s) or Director(s) of the company/business:

- a) been convicted of an offence of dishonesty or of an offence relating to prescribed work?
(If an Infringement Notice relating to prescribed work has been issued to the company/business or to the owner(s) or Director(s), you should tick yes.) No Yes
- b) settled a civil action or had a civil judgment given against them in their capacity as a contractor? No Yes
- c) had a licence / registration / certificate relating to prescribed work refused, disqualified, cancelled or suspended? No Yes
- d) had conditions placed on a licence / registration / certificate relating to prescribed work? No Yes
- e) been declared bankrupt, been discharged from bankruptcy, entered into arrangements with creditors or assigned their property to pay debts? No Yes
- f) been subject to a winding up order or had a controller appointed or been placed in receivership, administration or under official management or entered into other arrangements with creditors due to insolvency? No Yes
- Is the company/business currently insolvent or in receivership? No Yes

If you have answered 'yes' to any of the questions above, please provide details.

Please complete the Declaration

Please Note: It is an offence to provide information on this form knowing it to be false or misleading or to omit any details known to you that makes the given information false or misleading. Penalties may apply.

I state that the content of this application form is true and correct.

Signature _____ Date _____

Contractor Licence Renewal Application Extra Information

Tasmanian Applicants

MUST lodge this application at a Service Tasmania Shop with payment. If your application is successful, you will receive confirmation within 21 days.

Interstate and New Zealand Applicants

MUST mail the original application form and payment to:

Consumer, Building and Occupational Services
PO Box 56, ROSNY PARK, TAS, 7018

If your application is successful, you will receive a confirmation within 21 days.

Fee Schedule for Plumbing Contractors

(No secondary occupation fees are payable by plumbers)

Plumber Contractor Licence self-employed with no other practitioners for 1 year	\$413.10
Plumber Contractor Licence self-employed with no other practitioners for 3 years	\$1170.45
Plumber Contractor Licence with 2 to 4 practitioners for 1 year	\$527.85
Plumber Contractor Licence with 2 to 4 practitioners for 3 years	\$1537.65
Plumber Contractor Licence with 5 to 9 practitioners for 1 year	\$795.60
Plumber Contractor Licence with 5 to 9 practitioners for 3 years	\$2333.25
Plumber Contractor Licence with 10 or more practitioners for 1 year	\$1063.35
Plumber Contractor Licence with 10 or more practitioners for 3 years	\$3136.50
Plumber Contractor Licence with one practitioner aged 65 and over for 1 year	\$104.04
Plumber Contractor Licence with one practitioner aged 65 and over for 3 years	\$275.40

Fee Schedule for Electrical and Gas-fitting

Electrical, Gas-fitting Contractor and Automotive Gas-Fitting Licence for 1 year	\$504.90
Secondary Occupation Fee for 1 year licence (not applicable to plumbers)	\$153.00

Personal information we collect from you for licensing processes will be used by the Consumer, Building and Occupational Services division of the Department of Justice, for that purpose and may be used for other purposes permitted by the *Occupational Licensing Act 2005* and associated laws. Your personal information may be disclosed to contractors and agents of Consumer, Building and Occupational Services; law enforcement agencies, courts and other public sector bodies or organisations authorised to collect it. This information will be managed in accordance with the *Personal Information Protection Act 2004* and may be accessed by you on request to this Department. You may be charged a fee for this service. Failure to provide this information may result in your application not being processed or records not being properly maintained.

Credit Card Payment

Master Card Visa

Credit Card Number

Expiry date (mm/yy)

Amount Paid \$

Cardholder's Name

Phone number

Signature