

APPLICATION FOR A LICENCE TO IMPORT SECURITY SENSITIVE SUBSTANCES 2015/2016

 Made under the *Dangerous Substances Act 2004* and *Dangerous Substances (General) Regulation 2004*
Application Queries

For further information, please contact Access Canberra WorkSafe ACT during business hours quoting the following details, 'Importing Security Sensitive Substances Licence/Application for a Licence to Import Security Sensitive Substances':

 Access Canberra
255 Canberra Avenue,
FYSHWICK ACT 2609

 Telephone: (02) 6207 3000
E-mail: dangeroussubstances@act.gov.au

The fee for this application is \$.00 (GST exempt)

The WorkSafe ACT ABN is: 98 636 852 025

Please note:

Please nominate the period you require the licence for by selecting box for 1, 2 or 3 years.

Note: the fee per year is \$1,206.00 and is to be multiplied by the number of years selected.

EG: 1year = \$1,206.00, 2 years = \$2,412.00, 3 years = \$3,618.00 .

<input type="checkbox"/> 1 Year	<input type="checkbox"/> 2 Years	<input type="checkbox"/> 3 Years
\$1,206.00	\$2,412.00	\$3,618.00

Proposed Licensee's Name:
Option 1: In Person

 Access Canberra
255 Canberra Avenue
FYSHWICK ACT 2609

Option 2: Mail

 WorkSafe ACT
Dangerous Substances
GPO Box 158
CANBERRA ACT 2601

Option 3: Fax

 WorkSafe ACT
(02) 6205 0336

Option 4: Email *

 Payment cannot be accepted via email.
Remove and submit this page for payment through Option 1, 2 or 3.
Submit remainder of application to:
dangeroussubstances@act.gov.au
Provide a mailing address:

Note: if option 2 or 3 is the method of payment, provide a mailing address to post tax invoice.

Confirmation of Application Submission (Complete for Option 4 only - Application submitted by Email)
 I confirm that the Application has been emailed to Dangerous Substances.

Contact Person's Name

Contact Person's Signature

Date

Payment by Cheque or Money Order (Not applicable for Option 3 - payment via fax)
 Please make payment payable to 'Access Canberra'.

Credit Card Payment Authority
 Please charge payment to my MasterCard Visa Card

Card no.

Expiry date

MM/YYr

CCV (last 3 digits on the back of the card above the signature block)

Card Holders Authorisation

I consent to the Access Canberra debiting the following amount from my credit card to the value of: \$.00

Cardholders full name: _____

Contact Number: _____

Signature: _____

Dated: _____

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General Information and Instructions

What must be included in the application?

The application must include all of the relevant information required from the *Dangerous Substances (General) Regulation 2004*, and any other information required by this application form.

Note the following information:

1. This application, and any licence issued as a result of the application, is for the purpose of importing security sensitive substances.
2. A licence will not be issued until payment of the prescribed fee has been made. If paying by cheque, the licence will not be issued until the funds are cleared.
3. Where a licence is issued as a result of the application, it will include a condition prohibiting the sale of security sensitive substances and explosives under the authority of the licence.
4. This licence will be valid only in the Australian Capital Territory and will not be transferable.
5. This application, and any licence issued as a result of the application does not specifically or by implication authorise any explosives or security sensitive substances or the manufacture, carriage, supply or use of security sensitive substances or explosives.
6. If any information or document provided with this application is false or misleading, then the Director General may take disciplinary action under Part 4.4 of the *Dangerous Substances Act 2004*.

Collection and Use of Personal Information:

Access Canberra WorkSafe ACT is collecting the information on this form to process your application request to import security sensitive substances under section 417 of the *Dangerous Substances (Explosives) Regulation 2004*. The information provided will assist in making decisions as to the suitability of the proposed licensee to hold a licence in accordance with the Regulation.

Other information may be disclosed to Commonwealth, State and Territory government agencies with responsibility for decisions that involve, or are impacted on by, the import of security sensitive substances. Access Canberra WorkSafe ACT may also disclose personal information to any person who is authorised by law to obtain it.

Australian Federal Police (AFP) and Australian Security Intelligence Organisation Security Assessment (ASIO) Checks:

It is a requirement of this application that a combined AFP and ASIO security assessment specifying the handling of security sensitive substances ('Check') be lodged through the AFP by the proposed licensee and any responsible person to be named on the licence. This Check applies to the proposed licensee where the application is lodged as an 'Individual' and any person who is to be a responsible person for the security sensitive substances. If this application is lodged by a 'Corporation' a combined AFP and ASIO security assessment specifying the handling of security sensitive substances ('Check') be lodged by the responsible person(s) for the 'Corporation', and also lodge and provide a copy of an AFP name check for the 'Corporation'.

In addition, the Director General reserves the right to require the proposed licensee to provide a recent Check on any close associates of the proposed licensee if the proposed licensee is a business.

Should the proposed licensee or any responsible person to be named on the licence lodge a standard AFP Police Name check, the result cannot be accepted by WorkSafe ACT and shall require a re-lodge for the appropriate Check. This would result in a delay to the licence application process.

Form Completion Note: At 'Section iv - specify position/entitlement' of the 'National Police Check application form', the proposed licensee and any responsible person to be named on the licence must specify 'Handling of security sensitive substances' and render the correct fee, to generate the required Check.

Copies of the AFP 'National Police Check application form' can be obtained from WorkSafe ACT.

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Note: this application must be submitted at least **56 days** prior to requirement.

<p>Before signing and submitting this application, please read all information on Pages 1 to 3 of this application. Unsigned or incomplete applications or applications not accompanied by the required documentation or fee, where applicable, shall be returned to the proposed licensee for rectification.</p>		<p>OFFICE USE ONLY</p> <p>Checklist complete?</p> <p style="text-align: center;">Y / N</p>
<p>1. Application Checklist</p> <p>The Director General need not consider an application that is incomplete or does not provide all of the required information. To assist in ensuring that all relevant information is provided, please complete the following checklist.</p> <p><input type="checkbox"/> <u>Application Payment</u> (Mandatory) - please provide payment details as outlined on the first page of the Application.</p> <p><input type="checkbox"/> <u>Application Form</u> (Mandatory) - completed and signed. If submitting electronically (disc or email), the Application must be signed with an electronic signature or a signed hard copy of the appropriate Application page must be provided.</p> <p>Attachments/Other Documents</p> <p><input type="checkbox"/> <u>AFP & ASIO Check</u> (Mandatory) - refer to '<i>General Information and Instructions</i>'.</p> <p><input type="checkbox"/> <u>Identification Papers</u> (Mandatory) - a document (or documents) that show, for the proposed licensee and each responsible person to be named on the Licence, their age and residential address. Refer to '<i>Section 3.1 or Section 3.2</i>' for further information.</p> <p><input type="checkbox"/> <u>Responsible Person</u> (Mandatory) - details of additional responsible persons attached to the Application. Refer to '<i>Section 3.1 or Section 3.2</i>' for further information (if applicable).</p> <p><input type="checkbox"/> <u>Additional information</u> - where there is insufficient space on the Application Form, annotate the question number to the attachment (Example: '<i>Attachment references 13.b</i>').</p>		<p>Fee paid?</p> <p style="text-align: center;">Y / N</p> <p>Receipt No?</p> <p style="text-align: center;">_____</p> <p>Receipt date:</p> <p style="text-align: center;">---/---/---</p>
<p>2. Statement of Application (declaration and consent): To the Director General</p>		
<p>The Statement of Application is to be signed by, where the is an Individual, the . Where the is a Corporation or, it is to be signed by a partner or director of the entity.</p>		
<p>I declare that all relevant details provided by me in this application are true and correct and have been provided with the knowledge and belief that it is an offence to provide false or misleading information in the application for the licence.</p> <p>I give consent to the collection and use of personal information by Access Canberra WorkSafe ACT for the purposes outlined in the section headed '<i>Collection and Use of Personal Information</i>' in this form.</p>		<p>OFFICE USE ONLY</p> <p>Statement complete?</p> <p style="text-align: center;">Y / N</p> <p>Date application received?</p> <p style="text-align: center;">---/---/---</p>
<p>Signature:</p>	<p>Name of the Corporation, if applicable:</p>	
<p>Name of signatory in capitals:</p>	<p>Trading Name, if applicable:</p>	
<p>Date application signed:</p>		

3. Details of Proposed Licensee

The proposed licensee is the name of the Individual or Corporation that the licence will be issued to. Where the proposed licensee is identified as an individual, the licence will be issued to the individual named at Section 3.1 - for example, 'John Smith'. Where the proposed licensee is identified as a Corporation, the licence will be issued to the Corporation named at Section 3.2 - for example, 'Smith and Sons Pty Ltd'.

3a) Indicate below whether the is an Individual or a Corporation:

Individual - [complete 3.1 only](#) Corporation - [complete 3.2 only](#)

3.1 Details of Licensee - as an Individual

Full name: _____ Gender: M F

Date of birth: _____

Telephone No: () _____ Facsimile No: () _____

Mobile No: _____

Email address: _____

Residential address (include postcode): _____ Postal address (include postcode): _____

Provide copies of identification papers for the Individual licensee:
 Note: a document (or documents) that shows the proposed licensee's name, age and residential address. Attached:

Contact Person (in relation to this application): _____

OFFICE USE ONLY
 DS(Gen)Reg2004
 s.417 (a)
 Proposed licensee type?
 * Individual
 or
 * Business
 Section complete?
 Y / N

3.1 For the Individual Licensee - Details of Any Other Responsible Person to be Named on the Licence

Any person identified as a 'responsible person' is to be named on the licence. As prescribed in the *Dangerous Substances Act 2004*, "a person is a responsible person for a dangerous substance if the person is a person in control of the handling of the substance; or a person in control of premises where the substance is handled; or a person in control of plant or a system for handling the substance. To remove any doubt, more than 1 person may be a responsible person for a duty under this Act". In addition, and as prescribed in the *Dangerous Substances (General) Regulation 2004*, a person is deemed to have "unsupervised access to a security sensitive substance if the person has access to the substance when not under the supervision of a person who holds a licence under Chapter 4 of this regulation or a security cleared responsible person named in the licence"

Note: where there is more than one Responsible Person to be listed, photocopy this section, complete in full and attach to the application.

Provide the following details of the *Responsible Person*:

Full name: _____ Gender: M F

Date of birth: _____

Telephone No: () _____ Facsimile No: () _____

Mobile No: _____

Email address: _____

Residential address (include postcode): _____ Postal address (include postcode): _____

Provide copies of identification papers for the *Responsible Person*:
 Note: a document (or documents) that shows the *Responsible Person's* name, age and residential address. Attached:

OFFICE USE ONLY
 DS(Gen)Reg2004
 s.417 (a)
 Section complete?
 Y / N / N/A

3.2 Details of Licensee - as a Corporation		OFFICE USE ONLY
Registered Name of Corporation: <i>Note: write 'Not Applicable' if an individual/natural person</i>		DS(Gen)Reg2004 s.417 (a) & (b) Section complete? Y / N / N/A
Registered Business Name/Trading Name: <i>Note: If trading is carried out under a different name to the Corporation name</i>		
Australian Company Number (A.C.N.): Australian Business Number (A.B.N.):		
Telephone No: ()	Facsimile No: ()	
Mobile No:		
Email address:		
Registered Office address (include postcode):	Postal address (include postcode):	
Contact Person (in relation to this application):		
3.2 For the Corporation Licensee - Details of Any Other Responsible Person to be Named on the Licence		
<p>Any person identified as a 'responsible person' is to be named on the licence. As prescribed in the <i>Dangerous Substances Act 2004</i>, "a person is a responsible person for a dangerous substance if the person is a person in control of the handling of the substance; or a person in control of premises where the substance is handled; or a person in control of plant or a system for handling the substance. To remove any doubt, more than 1 person may be a responsible person for a duty under this Act". In addition, and as prescribed in the <i>Dangerous Substances (General) Regulation 2004</i>, a person is deemed to have "unsupervised access to a security sensitive substance if the person has access to the substance when not under the supervision of a person who holds a licence under Chapter 4 of this regulation or a security cleared responsible person named in the licence"</p>		
<i>Note: where there is more than one Responsible Person to be listed, photocopy this section, complete in full and attach to the application.</i>		
Provide the following details of the <i>Responsible Person</i> :		OFFICE USE ONLY DS(Gen)Reg2004 s.417 (a) Section complete? Y / N / N/A
Full name:	Gender: <input type="checkbox"/> M <input type="checkbox"/> F	
Date of birth:		
Telephone No: ()	Facsimile No: ()	
Mobile No:		
Email address:		
Residential address (include postcode):	Postal address (include postcode):	
Provide copies of identification papers for the <i>Responsible Person</i> : <i>Note: a document (or documents) that shows the Responsible Person's name, age and residential address.</i>	Attached: <input type="checkbox"/>	

4. Close Associates

4a) Provide the names of all 'Close Associates' of the Corporation, or applicant if an individual, as prescribed in section 48 of the *Dangerous Substances Act 2004*:

OFFICE USE ONLY
 DSAct2004
 s.48
 Section complete?
 Y / N

5. Determination of Proposed Licensee as a Suitable Person

Provide the following information as prescribed in section 49 of the *Dangerous Substances Act 2004* that the Director General needs to consider when determining if the proposed licensee is a suitable person for the purposes of the Application.

OFFICE USE ONLY
 DSAct2004
 s.49
 Section complete?
 Y / N

5a) Has the proposed licensee, or a close associate of the proposed licensee, or a corporation of which the proposed licensee was at the relevant time an executive officer, supplied information or a document that was false or misleading in a material particular in relation to the *Dangerous Substances Act 2004*?

Yes:
 No:

Note: if yes, the proposed licensee must provide full and accurate details including any action taken as a result of the provision of false or misleading information by the regulator or other agency.

5b) Is the proposed licensee, or a close associate of the proposed licensee, or a corporation of which the proposed licensee was an executive officer, disqualified under the *Dangerous Substances Act 2004* or a corresponding law, from holding a licence?

Yes:
 No:

Note: if yes, the proposed licensee must provide full and accurate details, including type of licence, date declared disqualified and the reasons given for disqualification.

5c) Has the proposed licensee, or a close associate of the proposed licensee, or a corporation of which the proposed licensee was at the relevant time an executive officer, contravened the *Dangerous Substances Act 2004* or a corresponding law?

Yes:
 No:

Note: if yes, the proposed licensee must provide full and accurate details of the contravention, including any results of the contravention, such as dangerous occurrence or injury, and any action taken to correct the contravention, including action taken by the regulator or other agency.

5. Determination of Proposed Licensee as a Suitable Person (Continued)

OFFICE USE ONLY

DSAct2004
s.49

Section complete?

Y / N

5d) Has the proposed licensee, or a close associate of the proposed licensee, or a corporation of which the proposed licensee was at the relevant time an executive officer, failed to comply with a condition of a licence or other authority under the *Dangerous Substances Act 2004*, or a corresponding law (whether or not this failure to comply resulted in a conviction or finding of guilt for the failure to comply)?

Yes:

No:

Note: if yes, the proposed licensee must supply full and accurate details of the breach of conditions, including the condition breach, how the breach occurred, the results of any breach, such as a dangerous occurrence or injury, and any action taken to correct the breach, including action taken by the regulator or other agency.

5e) Has the proposed licensee, or a close associate of the proposed licensee, had action taken against them under Part 4.4 (Disciplinary action) of the *Dangerous Substances Act 2004*?

Yes:

No:

Note: if yes, the proposed licensee must supply full and accurate details of the action taken and the reasons the action was taken.

5f) Has the proposed licensee, or a close associate of the proposed licensee, or a corporation of which the proposed licensee was at the relevant time an executive officer, been convicted or found guilty in the ACT or elsewhere, within the five years prior to this application, of an offence involving a dangerous substance?

Yes:

No:

Note: if yes, the proposed licensee must provide full and accurate details, including any penalty and/or sentence imposed. Refer to the note about the Spent Conviction Scheme for further information.

5g) Has the proposed licensee, or a close associate of the proposed licensee, been convicted or found guilty in the ACT or elsewhere, within the five years prior to the application, of an offence involving -

- a firearm?
- actual or threatened violence?
- fraud or dishonesty?

Yes: No:

Yes: No:

Yes: No:

Note: if yes, the proposed licensee must provide full and accurate details, including any penalty and/or sentence imposed. Refer to the note about the Spent Conviction Scheme for further information.

5. Determination of Proposed Licensee as a Suitable Person (Continued)		OFFICE USE ONLY
5h) Has the proposed licensee, or a close associate of the proposed licensee, within the five year period prior to this application, been subject to a protection order or corresponding protection order (other than an order that has been revoked or for which an appeal against the making of the order has been made)? <div style="float: right;"> Yes: <input type="checkbox"/> No: <input type="checkbox"/> </div>		DSAct2004 s.49 Section complete? Y / N
<p>Note: if yes, the proposed licensee must supply full and accurate information about the protection order or corresponding protection order, including the conditions of the order, the date the order was issued, and the time period of the order.</p>		
6. Purpose of Security Sensitive Substance Import		
6a) Provide the purpose of the import of the security sensitive substance:		OFFICE USE ONLY DS(Gen)Reg2004 s.417 (c) Section complete? Y / N
7. Storage and Licence Details		
7a) Provide the address of the premises where the security sensitive substances are to be stored, including post code: <p>Note: if storage sites are unknown at the time of the application, please state 'storage sites are unknown at this time'.</p>		OFFICE USE ONLY DS(Gen)Reg2004 s.417 (d) Section complete? Y / N
<p>Note: where there are multiple storage sites, photocopy this section, complete and attach all paperwork to the application.</p>		
8. Details of the Security Sensitive Substance		
8a) Provide the name and classification of the security sensitive substance:		OFFICE USE ONLY DS(Gen)Reg2004 s.417 (e) Section complete? Y / N
Product Name (as authorised)	Classification Code:	
<i>Example:</i> Ammonium Nitrate	<i>Example:</i> 5.1	

9. Import Carrier's Details

9a) Provide the following information about the 'carrying licence' holder who is to carry the security sensitive substance in the ACT (that is, the actual person who is to physically transport the substance):

Note: for the definition of a 'carrying licence', refer to section 421 of the *Dangerous Substances (General) Regulation 2004*.

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DS(Gen)Reg2004
s.423 (1) & 424

Internal Policy

Full name:

Name of Carrying Authority/Licence:

Note: for example, 'Carrying Security Sensitive Substance Licence'.

Issuing State or Territory Authority:

Note: for example, 'NSW WorkCover'.

Authority/Licence number:

Authority/Licence expiry date:

9b) If an ACT issued carrying licence or an equivalent corresponding interstate licence is not held, under what authority does the proposed licensee intend to carry the security sensitive substance?

END OF APPLICATION