



## APPLICATION FOR A LICENCE TO SUPPLY EXPLOSIVES 2015/2016

### Application Queries

For further information, please contact WorkSafe ACT during business hours quoting the following details, 'Supplying Explosives Licence/Application for a Licence to Supply Explosives':

Access Canberra  
255 Canberra Avenue,  
FYSHWICK ACT 2609

Telephone: (02) 6207 3000  
E-mail: [dangeroussubstances@act.gov.au](mailto: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 \$631.00 and is to be multiplied by the number of years selected.

EG: 1year = \$656.00, 2 years = \$1,312.00, 3 years = \$1,968.00 .

<input type="checkbox"/> 1 Year	<input type="checkbox"/> 2 Years	<input type="checkbox"/> 3 Years
\$656.00	\$1,312.00	\$1,968.00

### 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](mailto: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.

Applicant's Name

Applicant'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

MM/YYr

Card no:

Expiry date:

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

### Card Holders Authorisation

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

Cardholders full name: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Signature: \_\_\_\_\_

Dated: \_\_\_\_\_

## APPLICATION FOR A LICENCE TO SUPPLY EXPLOSIVES 2015/2016

### 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 (Explosives) Regulation 2004*, and any other information required by this application form.

#### Note the following information:

1. This application, and any licence issued a result of the application, is for the purpose of supplying the types of explosive listed in the licence only.
2. A licence will not be issued payment of the prescribed fee has been made. If paying by cheque, the licence will not be issued until the funds are cleared.
3. This licence will be valid only in the Australian Capital Territory and will not be transferable.
4. This application, and any licence issued as a result of the application does not specifically or by implication authorise any explosives or the manufacture, carriage, import, store or use of explosives.
5. A licence to supply explosives only allows the supply of authorised 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 supply explosives under section 171 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 explosives. 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 explosives ('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 explosives. If this application is lodged by a Corporation /Partnership', a combined AFP and ASIO security assessment specifying the handling of explosives ('Check') be lodged by the responsible person(s) for the 'Corporation/Partnership', also lodge and provide a copy of an AFP name check for the 'Corporation/Partnership'.

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 explosives' 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.

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.		OFFICE USE ONLY  Checklist complete?  Y / N  Fee paid?  Y / N  Receipt No?  _____  Receipt date:  --- / --- / ---
<b>1. Application Checklist</b> 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.		
<input type="checkbox"/> <u>Application Payment</u> (Mandatory) - please provide payment details as outlined on the first page of the Application.  <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.		
<b>Attachments/Other Documents</b>		
<input type="checkbox"/> <u>AFP &amp; ASIO Check</u> (Mandatory) - refer to ' <i>General Information and Instructions</i> '. <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. If a business/Company, provide a copy of the registration certificate for the Business/Company.  <input type="checkbox"/> <u>Responsible Person</u> (if applicable) - details of additional responsible persons attached to the Application. Refer to ' <i>Section 3.1 or Section 3.2</i> ' for further information. <input type="checkbox"/> <u>Safety Management System</u> (Mandatory) - refer to ' <i>Section 8</i> '. <input type="checkbox"/> <u>List of Explosives</u> (Mandatory) - refer to ' <i>Section 9</i> '. <input type="checkbox"/> <u>Procedures for the Supply of Authorised Products</u> (Mandatory) - refer to ' <i>Section 10</i> '. <input type="checkbox"/> <u>Record Keeping</u> (Mandatory) - refer to ' <i>Section 11</i> '. <input type="checkbox"/> <u>Additional information</u> - where there is insufficient space on the Application Form, reference the question number to the attachment (Example: 'Attachment references 4a').		
<b>2. Statement of Application (declaration and consent): To the Director General</b>		
The Statement of Application is to be signed by, where the proposed licensee is an Individual, the proposed licensee. Where the proposed licensee is a Corporation or Partnership, it is to be signed by a partner or director of the entity.		
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.  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.		OFFICE USE ONLY  Statement complete?  Y / N  Date application received?  --- / --- / ---
Signature:	Name of the Corporation, if applicable:	
Name of signatory in capitals:	Trading Name, if applicable:	
Date application signed:		

### 3. Details of Proposed Licensee

The proposed licensee is the name of the Individual or Corporation/Partnership 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/Partnership, the licence will be issued to the Corporation/Partnership named at Section 3.2 - for example, 'Smith and Sons Pty Ltd'.

3a) Indicate below whether the proposed licensee is an Individual or a Corporation/Partnership:

Individual - [complete 3.1 only](#)       Corporation/Partnership - [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 age and residential address. Attached:

Contact Person (in relation to this application): \_\_\_\_\_

OFFICE USE ONLY  
 DS(Exp)Reg2004 s.169 (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 (Explosives) Regulation 2004*, a person is deemed to have "unsupervised access to an explosive if the person has access to the explosive when not when not under the supervision of a person who holds for a licence for this regulation; or is a security cleared responsible person".

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 age and residential address. Attached:

OFFICE USE ONLY  
 DS(Exp)Reg2004 s.169 (a)  
 Section complete?  
 Y / N / N/A

3.2 Details of Licensee - as a Corporation/Partnership		OFFICE USE ONLY
Registered Name of Corporation: <i>Note: write 'Not Applicable' if a Sole Trader or a Partnership</i>		DS(Exp)Reg2004 s.169 (a) & (b)
Registered Business Name/Trading Name: <i>Note: If trading is carried out under a different name to Corporation or Sole Trader's Name</i>		Section complete? Y / N / N/A
Australian Company Number (A.C.N.):	Australia 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/Partnership 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 (Explosives) Regulation 2004*, a person is deemed to have "unsupervised access to an explosive if the person has access to the explosive when not when not under the supervision of a person who holds for a licence for this regulation; or is a security cleared responsible person".

**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:		O OFFICE USE ONLY
Full name:	Gender: <input type="checkbox"/> M <input type="checkbox"/> F	DS(Exp)Reg2004 s.169 (a)
Date of birth:		Section complete?
Telephone No: ( )	Facsimile No: ( )	Y / N / N/A
Mobile No:		
Email address:		
Residential address (include postcode):	Postal address (include postcode):	
Provide copies of identification papers for the Responsible Person: <i>Note: a document (or documents) that shows the Responsible Person's age and residential address.</i>		Attached: <input type="checkbox"/>

<b>4. Close Associates</b>	
4a) Provide the names of all 'Close Associates' of the Corporation/Partnership as prescribed in section 48 of the <i>Dangerous Substances Act 2004</i> :	OFFICE USE ONLY DSAct2004 s.48 Section complete? Y / N
<b>5. Determination of Proposed Licensee as a Suitable Person</b>	
Provide the following information as prescribed in section 49 of the <i>Dangerous Substances Act 2004</i> that the Director General needs to consider when determining if the proposed licensee is a suitable person for the purposes of the Application.  Note: the aim of the Spent Conviction Scheme is to prevent discrimination on the basis of certain previous convictions. For further information, refer to the Australian Federal Police (AFP) website at <a href="http://www.afp.gov.au">www.afp.gov.au</a> or the 'AFP National Police Check 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 <i>Dangerous Substances Act 2004</i> ?	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
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 <i>Dangerous Substances Act 2004</i> or a corresponding law, from holding a licence?	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
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 <i>Dangerous Substances Act 2004</i> or a corresponding law?	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
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 (continuation)

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:

OFFICE USE ONLY

DSAct2004  
s.49

Section complete?

Y / N

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 of 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 (continuation)		
<p>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)?</p>	Yes: <input type="checkbox"/> No: <input type="checkbox"/>	OFFICE USE ONLY  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 Explosives Supply		
<p>6a) Provide the purpose for the supply of explosives: (Eg: Supply of pyrotechnics, supply for retail)</p>		OFFICE USE ONLY DS(Exp)Reg2004 s.169 (c)  Section complete?  Y / N
7. Storage Licence Details		
<p>A 'Storing Explosive Licence - Magazine' (SML) is not required if the storage site is located interstate. If storage requirements are outside of the scope of table 123/124 of the <i>Dangerous Substances (Explosives) Regulation 2004</i>, a valid 'Storage Explosive Licence - Magazine' (SML) must be held. If storage is related to Queen's Birthday Supply, the receiver must hold a 'Consumer Fireworks Licence' (CFL).</p>		
<p>7a) Provide details of any licence authorising the storage of the explosives at the premises from which the explosives are to be supplied: Note: A '<i>Storing Explosive Licence - Magazine</i>' is the only recognised licence for the purposes of this section.</p>		OFFICE USE ONLY  DS(Exp)Reg2004 S.169 (d)  Section complete?  Y / N
Name of ' <i>Storing Explosive Licence - Magazine</i> ' (SML) holder:		
' <i>Storing Explosive Licence - Magazine</i> ' (SML) number:		
' <i>Storing Explosive Licence - Magazine</i> ' (SML) expiry date:		
Postal address of licence holder, including post code:		
8. Safety Management System		
<p>8a) Attach documentation describing a Safety Management System for the supply of explosives under the licence. As prescribed in section 19 of the <i>Dangerous Substances Act 2004</i>, the Safety Management System must:</p> <ul style="list-style-type: none"> <li>identify the hazards associated with the explosives;</li> <li>identify and assess the risks resulting from the hazards;</li> <li>control the risk by eliminating, or minimising, the risk as far as is reasonably practicable;</li> <li>provide for how compliance with the system is to be documented; and</li> <li>complies with any requirement prescribed by regulation (either in addition to or instead of a requirements mentioned in section 19, paragraphs (a) to (e) of the <i>Dangerous Substances Act 2004</i>).</li> </ul>	Attached: <input type="checkbox"/>	OFFICE USE ONLY  DS(Exp)Reg2004 s.169 (e)  Section complete?  Y / N



## 9. List of Explosives for Supply

Only authorised explosives may be supplied.

9a) Provide details for each kind of explosive to be supplied:

Note: If there is insufficient space to list all explosives, photocopy Section 9, complete in full and attach to the Application. No other document will be accepted for the requirements of this section.

Attached:   
Number of Pages:

OFFICE USE ONLY

DS(Exp)Reg2004  
s.169 (f)

Section complete?

Y / N

Authorised Explosive Number	Product Name (as authorised)	UN Number	Classification Code
<i>Example:</i> AE X9205	<i>Example:</i> Blue to Red Falling Leaves	<i>Example:</i> UN 0336	<i>Example:</i> 1.4G
AE		UN	
AE		UN	
AE		UN	
AE		UN	
AE		UN	
AE		UN	
AE		UN	
AE		UN	
AE		UN	
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<b>10. Procedures for the Supply of Authorised Products</b>	
<p>10a) Provide details of procedures to ensure that explosives are only supplied to people authorised to receive them:  Note: refer to section 174 of the <i>Dangerous Substances (Explosives) Regulation 2004</i> for compliance requirements.</p>	OFFICE USE ONLY  DS(Exp)Reg2004 s.169 (g)  Section complete? Y / N
<b>11. Record Keeping Procedures</b>	
<p>11a) Provide details of record-keeping procedures to be adopted to ensure compliance with the <i>Dangerous Substances Act 2004</i>:  Note: refer to section 176 of the <i>Dangerous Substances (Explosives) Regulation 2004</i> for compliance requirements.</p>	OFFICE USE ONLY  DS(Exp)Reg2004 s.169 (h)  Section complete? Y / N

**END OF APPLICATION**