Interstate Certification Assurance or Certification Assurance application

Before you start

This application is for an Interstate Certification Assurance (ICA) or Certification Assurance (CA) accreditation if your business exports fruit or vegetables from the Northern Territory.

A \$432 fee applies to all ICA/CA applications. A late fee of \$135 may apply for renewals if your current certification has expired for a period of time.

Fields marked with a caret (^) are for office use only.								
Application details								
What type of accreditation are you applying for?								
New	v Yes/No		Renewal	Yes/No	Amendment	Yes/No		
Business detail	s							
Business name								
ABN								
Contact name								
Position title								
Mobile				Landline number				
Email								
Postal address								
Have you previous been registered interstate move produce? If yes, provide your interstate products interstate products.	d for ement of your	Yes/	No					
Operational procedure details								
Operational pro								



Title of procedure					
Description of the types of produce to be prepared Include varieties					
Facility address					
Facility phone					
What records do you ma	aintain to verify that the	business is carrying out its responsibilities and duties?			
We maintain all our records in accordance with the example provided in the operational procedure		Yes/No			
We have developed alternative or additional records to those provided in the operational procedure.		Yes/No			
If yes, provide details of the alternative records you intend to use and attach a copy					
Authorised signatories o	letails				
Certification controller					
Full name					
Signature					
Backup certification controller					
Full name					
Signature					
Additional signatories					
Full name					
Signature					
Full name					
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Supporting documents					
Alternative or additional records to those provided in the operational proced If applicable	Yes/No				
Confirmation					
I confirm the following:					
I will maintain and operate the Interstate Certification Assurance system in accordance with the operational procedure as nominated in this application, maintain the records outlined in this application.	Yes/No				
I will, upon request, allow an inspector to enter any premises or facilities who produce certified under the agreement is treated or dispatched, or where any produce, equipment, chemicals, documents for records are stored.	Yes/No				
I acknowledge that the inspector may take samples of any relevant item pres the premises or facilities at the time of the inspection.	Yes/No				
I will take all steps to assist an inspector in the conduct of audits including all the inspector or officer to interview any employee of the applicant in relation implementation of the Interstate Certification Assurance system.	Yes/No				
I authorise persons listed as authorised signatories to issue Plant Health Assu certificates on my behalf.	Yes/No				
In the event of cancellation or non-renewal of this arrangement the Plant He Assurance certificate pad and any green copies must be returned as they remproperty of the Plant Biosecurity Branch.	Yes/No				
I agree to abide by the accreditation conditions listed above and acknowledg any accreditation is granted subject to those conditions.	Yes/No				
All of the information contained in this application is true and correct.	Yes/No				
Signatures					

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Office use only ^						
Name		Date received				
Signature		Date completed				
Audit	Passed/Failed					

Submit

Email your completed form to <u>plantbiosecurity@nt.gov.au</u>.

or by mail
Department of Industry, Tourism and Trade
Plant Biosecurity Branch, Berrimah Farm Science Precinct
GPO Box 3000, Darwin NT 0801

You can also call the branch on 08 8999 2118 for more information.

Payment

Pay in person at a Receiver of Territory Monies (RTM) office.¹ Present this completed form.

Collection notice

The Department of Industry, Tourism and Trade collects this information in order to process and manage applications for permits issued under the <u>Plant Health Act 2008</u>² (and, if approved, any subsequent permits).

If you choose not to provide your personal information required for the application we might not be able to accept or process your application, or your application may be refused.

Third party information is required by law to enable consideration of the applicant's suitability to hold a permit. If the applicant does not provide this information, it may affect their ability to obtain and maintain a permit.

We may share your information:

- with other State and Territory Accrediting ICA Authorities, local council or other authorities but only if we are required or authorised by law to do so
- if required or authorised by law to do so
- if you have given us your consent to share your personal information for a specific purpose.

The Department of Industry, Tourism and Trade's <u>privacy policy</u>³ outlines how we manage personal information and includes how to lodge a complaint.

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¹ https://nt.gov.au/industry/licences/receiver-of-territory-monies-contacts

² https://legislation.nt.gov.au/en/Legislation/PLANT-HEALTH-ACT-2008

³ https://industry.nt.gov.au/publications/corporate/privacy-policy