

Application for a property agent licence as an individual or sole trader

Licence term (select one)					
1 year	<input type="checkbox"/>	3 years	<input type="checkbox"/>	5 years	<input type="checkbox"/>
Licence class (select one)					
Business agent	<input type="checkbox"/>	Conveyancing agent	<input type="checkbox"/>		
Real estate agent	<input type="checkbox"/>	Real estate and business agent	<input type="checkbox"/>		
Applicant details					
Surname:				Date of birth:	
Given name/s:					
Other name/s (if applicable):					
Residential address:					
Suburb:		State:		Postcode:	
Is your postal address the same as above? If no, complete below:					
Postal address:					
Suburb:		State:		Postcode:	
Contact details					
Phone number:			Mobile number:		
Email address:					
Qualifications and experience					
Do you hold, or have you held, a registration as an agent's representative under the <i>Agents Licensing Act 1979</i> ?					Yes / No
If yes, please provide relevant details below					
To be eligible for a licence you must meet the training or educational qualification requirements set out in s22 (1) (c) of the <i>Agents Licensing Act 1979</i> . Please provide details of training or educational qualification(s):					
Principle place of business					
Is your principle place of business address the same as your residential address?					Yes / No
If no, complete below					
Business address:					
Suburb:		State:		Postcode:	
Do you intend to carry on business as an agent on your own account?					Yes / No
If no, proceed to employer details and declaration					

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Do you intend to use a business or trading name?						Yes / No	
If yes, provide the business name, business number and website address below							
Business name:							
Business number:							
Website address:							
Do you intend to carry on business from more than one office?						Yes / No	
If yes, fill in the details in below. If more than 1 other places of business, copy and attach to application							
Details of other place of business							
Business manager name:				Licence number:			
Business address:							
Suburb:		State:		Postcode:			
Phone number:			Mobile number:				
Email address:							
Employer details							
Employer name:							
Licence number:							
Employer address:							
Suburb:		State:		Postcode:			
Phone number:			Mobile number:				
Email address:							
I declare that the above applicant is to be employed as the approved manager and that I have read and certify the applicant's disclosures.						<input type="checkbox"/>	
Business manager name:							
Business manager signature:				Date:			
Referee statement							
The following referee statement section is to be completed and signed by an authorised officer							
Referee name:							
of: (address)							
Suburb:		State:		Postcode:			
Position title:							
declare that I have known (applicant's name):							
For (number of years):		year(s) and that in my opinion he/she is a person of good fame and character.					
Referee signature:				Date:			

Disclosures	
In the 10 years immediately before applying for the licence, have you been found guilty (whether or not in the Territory) of an offence that involves dishonesty or violence or an offence against the <i>Misuse of Drugs Act 1990</i> or the <i>Kava Management Act 1998</i> ?	Yes / No
If yes, please provide details below	
Are you an undischarged bankrupt or have you applied to take the benefit of any law for the relief of bankrupt or insolvent debtors, compounded with creditors or made an assignment of your remuneration for their benefit?	Yes / No
If yes, please provide details below	
Are you mentally incapable of performing duties as an agent?	Yes / No
If yes, please provide details below	
Are you disqualified from holding a licence, certificate of registration or had a licence, certificate or other authority suspended under the <i>Consumer Affairs and Fair Trading Act 1990</i> ?	Yes / No
If yes, please provide details below	
Have you failed to pay a monetary penalty payable under this <i>Agents Licensing Act 1979</i> , the <i>Consumer Affairs and Fair Trading Act 1990</i> or corresponding law or failed to comply with a direction given by the Agents Licensing Board?	Yes / No
If yes, please provide details below	
Do you hold, or have previously held, a licence or registration as an agent's representative under the <i>Agents Licensing Act 1979</i> ?	Yes / No
If yes, please provide licence/registration number below	
Do you hold, or have previously held, a licence or registration as an agent's representative under any corresponding law in any other State or Territory?	Yes / No
If yes, please provide licence/registration number and State/Territory below	

Do you hold, or have previously held, a licence as an auctioneer under the <i>Auctioneer's Act 1935</i> ?		Yes / No	
If yes, please provide licence number below			
Applicant declaration			
I, (full name):			
Of (address):			
Solemnly and sincerely declare that:			
<ul style="list-style-type: none"> All statements and information contained in this application are true and correct to the best of my knowledge by virtue of the <i>Oaths, Affidavits and Declarations Act 2010</i>; and I have read and understood the information contained in this application; and The declaration is true and correct; and I know that it is an offence to make a declaration that is false in any material particular. 			
This declaration is made at: (location)		on: (date)	
Applicant signature:			
Note: Under the <i>Oaths, Affidavits and Declarations Act 2010</i> a person wilfully making a false statement or altering a statement, in a statutory declaration is guilty of a crime and is liable to a penalty or imprisonment, or both.			
Supporting documents checklist			
Prescribed application fee – See the real estate, business and conveyancing agent's page for current fee.			<input type="checkbox"/>
Current photo ID attached - Passport, Australian driver's licence or evidence of age card			<input type="checkbox"/>
Criminal history name check results attached. Note: Criminal history name results can take up to 6 weeks to be processed by SAFE NT.			<input type="checkbox"/>
Evidence of education qualifications and/or experience attached			<input type="checkbox"/>
Current business name extract (if applicable)			<input type="checkbox"/>
Evidence of name change (if applicable)			<input type="checkbox"/>
Completed and signed referee statement			<input type="checkbox"/>
Signed and completed employer declaration			<input type="checkbox"/>
Signed and completed declaration			<input type="checkbox"/>

Authorised persons

The Referee Statement is a character reference and must be completed by an authorised person who is:

- I. a person authorised by the *Oaths Act* to administer an oath for any purpose;
- II. a Justice of the Peace;
- III. a commissioner for declarations appointed by the Attorney-General of the Commonwealth under the *Statutory Declaration Act 1959* of the Commonwealth;
- IV. a legal practitioner;
- V. a member of the Northern Territory Police Force;
- VI. a bank manager;
- VII. a judge;
- VIII. a magistrate;
- IX. a notary public;
- X. a Registrar appointed under the *Local Court Act 2015*;
- XI. a master appointed under the *Supreme Court Act 1935*;
- XII. a commissioner for taking affidavits in the Supreme Court of a State or Territory;
- XIII. a licensed agent;
- XIV. a person registered or enrolled under the *Health Practitioners Act 2004*, (e.g. Medical Practitioner, Pharmacist, Dentist, Registered Nurse etc.);
- XV. a person registered as a teacher under the *Teachers Registration (Northern Territory) Act 2004*;
- XVI. a person who holds an office, appointment or authority in a State or Territory equivalent to any of those specified in (i) to (xv).

The person completing the Referee Statement **must not be a relation** as defined under Regulation 17(2) of the agents licensing regulations and must have known the person to whom the testimonial relates for a period of not less than 12 months.

Privacy statement

The Northern Territory Government complies with the Information Privacy Principles scheduled by the *Information Act 2002*.

Lodgement

Complete applications can be lodged in person, email or via post at a Territory Business Centre below:

Darwin:	Darwin Corporate Park, Ground Floor, Building 3, 631 Stuart Highway Berrimah	
Katherine:	Big Rivers Government Centre, 5 First Street, Katherine	
Tennant Creek:	Shop 2, Barkley House, Cnr Davidson and Paterson Streets, Tennant Creek	
Alice Springs:	Ground Floor, The Green Well Building, 50 Bath Street Alice Springs	
1800 193 111	territorybusinesscentre@nt.gov.au	GPO Box 9800 Darwin NT 0801

Payment details

A fee is payable on lodgement of this application form. Payment can be made by:

- Cash (in person only); or
- Cheque (made out to Receiver of Territory Monies); or
- Credit card (Visa or MasterCard accepted in person or over the phone). Note: A staff member from the Territory Business Centre will contact you via phone for payment.

Payment date:

Receipt number:

Amount paid: