Application for commercial and private agent individual licence

Use this form to apply for an individual commercial agent, private bailiff, inquiry agent or process server licence in accordance with Section 7 of the <u>Commercial and Private Agents Licensing Act 1979</u>.

See the <u>commercial and private agent licence</u> webpage further information on applicant requirements.

| Licence term (select one) | | | | | | | |
|--|------------|------------------------|-------------|-----------|-------------|-----------|----------|
| 3 years Yes / N | 0 | 5 years | Yes / | No | | | |
| Licence class (select a | oplicable) | | | | | | |
| Commercial agent | | Yes / No | Inquir | / agent | Yes / No | 0 | |
| Private bailiff | | Yes / No | Proces | ss server | Yes / No | D | |
| Applicant type | | | | | | | |
| Surname: | | | | | Date of bir | th: | |
| Given name/s: | | | | | | | |
| Other name/s (if appl | icable): | | | | | | |
| Residential address: | | | | | | | |
| Suburb: | | | | State: | | Postcode: | |
| Is your postal addres | s the san | ne as above? If no, co | omplete be | low: | | | |
| Postal address: | | | | | | | |
| Suburb: | | | | State: | | Postcode: | |
| Contact details | | | | | | | |
| Phone number: | | | I | Mobile nu | mber: | | |
| Email address: | | | | | | | |
| Do you agree to receive correspondence via email? Yes / No | | | | | Yes / No | | |
| Principal place of business | | | | | | | |
| ls your principal plac | e of busi | ness address the sam | ne as above | ? | | | Yes / No |
| If no, complete below. | | | | | | | |
| Business address: | | | | | | | |
| Suburb: | | | | State: | | Postcode: | |
| Do you intend to use a business or trading name? | | | | | Yes / No | | |
| If yes, complete below. | | | | | | | |
| Business name: | | | | | | | |
| Business number: | | | N | Nebsite a | ddress: | | |
| Do you intend to carry on business from more than one office? Yes / No | | | | Yes / No | | | |
| If yes, complete below. If more than one other place of business, copy and attach to this application. | | | | | | | |



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| Other place of business details | | | | | | | |
|---|--------------------------|--------------------------|-------------|------------|------|----------|----------|
| Business address: | | | | | | | |
| Suburb: | | | State: | | | Postcode | : |
| Phone number: | | | Mobile nu | ımber: | | | |
| Email address: | | | | | | | |
| Approved manager d | etails (manager m | ust reside in Australia) | | | | | |
| Do you intend to car | ry on business a | s an agent on your o | wn account? | | | | Yes / No |
| If yes, complete below | w. If no, proceed | d to employer details | 5. | | | | |
| ABN: | | | | | | | |
| Are you the approved | d manager for th | nis licence? | | | | | Yes / No |
| If no, please provide | details of appro | ved manager below. | | | | · | |
| Approved manager n | ame: | | | | | | |
| Approved manager li | cence number: | | | | | | |
| Employer details/dec | claration | | | | | | |
| Employer name: | | | L | licence nu | umbe | r: | |
| Postal address: | | | | | | · | |
| Suburb: | | | State: | | | Postcode | : |
| Phone number: | | | Mobile num | ber: | | | |
| Email address: | | | | | | | |
| I declare that the above applicant is employed by the above business and that I have read and certify the applicant's disclosures. | | | | | | | |
| Employer signature: | | | | Date: | | | |
| Disclosures | | | | | | | |
| 1. Have you been disqualified or suspended from holding a licence similar or the same as applied for in this application either in the Northern Territory or in any other State or Territory of Australia? | | | | | | | |
| If yes, provide details below: | | | | | | | |
| 2. 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? | | | | | | | |
| If yes, provide details below: | | | | | | | |

| 3. Have you been guilty of conduct that renders you unfit to hold a licence of the category for which you have applied? | Yes / No |
|--|----------|
| If yes, provide details below: | |
| | |
| 4. Have you contravened or failed to comply with a provision of this Act which may warrant the refusal of a licence? | Yes / No |
| If yes, provide details below: | |
| | |
| 5. In the last 10 years immediately before applying for the licence, have you been found guilty or served a term of imprisonment (whether or not in the Territory) for an offence that involves dishonesty, fraud or violence? | Yes / No |
| If yes, provide details below: | 5 |
| | |
| 6. Have you, as an agent, failed, without reasonable excuse, to obey an order of the Court or the Supreme Court? | Yes / No |
| If yes, provide details below: | 5 |
| | |
| 7. Have you, as an agent, wilfully failed to comply with a provision of the Commercial and Private Agents Licensing Act 1979 or of the Local Court Act 2015? | Yes / No |
| If yes, provide details below: | |
| | |
| 8. Are there any circumstances existing now or that you envisage will occur during the currency of the licence applied for that may restrict or incapacitate your capability to carry out duties required of a licence holder? | Yes / No |
| If yes, provide details below: | 5 |
| | |
| | |

| Proof of identity (ID) | | | | |
|---|------------|--|--|--|
| The applicant must attach either one of the following combinations: | | | | |
| One primary and two secondary documents; or | | | | |
| • Two primary and one secondary documents from the list below. D must include at least one type of primary ID that contains the applicants name and date of birth. If you are | | | | |
| unable to provide the required documents please contact Occupational Licensing on 1800 193 | | | | |
| Primary document | Select | | | |
| Australian passport (note: passports are still valid for 2 years after expiry, unless cancelled) | Yes / No | | | |
| Australian drivers licence | Yes / No | | | |
| Licence or permit issued by the Commonwealth, State or Territory government that has your DOB and photo i.e HRWL licence, working with children's card etc | Yes / No | | | |
| Proof of Age Card issued by an Australian State or Territory | Yes / No | | | |
| Identity document issued by an Aboriginal Land Council that has your photograph | Yes / No | | | |
| Secondary document | Select | | | |
| Australian birth certificate/card | Yes / No | | | |
| Australian citizenship certificate | Yes / No | | | |
| Photo ID card showing you are a Commonwealth, State or Territory Government employee | Yes / No | | | |
| Medicare, centrelink or health care card | Yes / No | | | |
| Council rates notice with your name and current residential address | Yes / No | | | |
| Utilities notice with your name and current residential address | Yes / No | | | |
| Foreign drivers licence | Yes / No | | | |
| Receiving licence | | | | |
| How do you wish to receive your licence? | | | | |
| Post Yes / No Collection Yes / No Email Yes / No | | | | |
| Applicant declaration | | | | |
| I, (full name): | | | | |
| Of (address): | | | | |
| Solemnly and sincerely declare that: | | | | |
| • All statements and information contained in this application are true and correct to the best of my | | | | |
| knowledge by virtue of the Oaths, Affidavits and Declarations Act 2010; and I have read and understood the information contained in this application; and | | | | |
| I know that it is an offence to make a declaration that is false in any material particular | | | | |
| This declaration was made at (location): On (date): | | | | |
| Applicant signature: | | | | |
| | atomost av | | | |
| Note: Under the <i>Oaths</i> , <i>Affidavits and Declarations Act 2010</i> a person wilfully making a false sta altering a statement, in a statutory declaration is guilty of a crime and is liable to a penalty or i | | | | |

or both.

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| Checklist | |
|---|----------|
| Prescribed application fee – See the <u>commercial and private agent licences</u> page for fees. Note: a granting fee must be paid once your licence is granted. You will be advised of the amount once your application has been approved. | Yes / No |
| Complete and signed applicant declaration. | Yes / No |
| Proof of identity (ID) documents attached. | Yes / No |
| National Criminal History Name Check results attached for the purpose of a Commercial and Private Agent Licence. Please note: results can take up to 6 weeks to be received. | Yes / No |
| Current business name extract attached (if applicable). | Yes / No |
| Application for approval as an agent's manager attached (If applicable. Note manager must reside in Australia) | Yes / No |

Privacy statement

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

Disclaimer

The Northern Territory Government respects and is committed to safeguarding the confidentiality and privacy of the information that it collects and handles, in accordance with the *Northern Territory Information Act* 2002.

You have been asked to provide personal information necessary for us to meet your application requirements. You do not have to provide your personal information but if you choose not to, this application will be incomplete and we will be unable to process it.

The information you provide will be accessible to Occupational Licensing and will only be used to provide a department service or program. We will not disclose your personal information to third parties unless, authorised or required by law to do so you have given us consent to share your personal information for a specific purpose.

You may request access to the personal information we hold about you. If you want more information about the Northern Territory's privacy laws, please refer to the *Northern Territory Information Act 2002*, or the <u>Office of the Information Commissioner NT</u>.

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, Barkly 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 | |
|---------------|-----------------|-------------|--|
|---------------|-----------------|-------------|--|