

Application for a renewal of an individual/sole trader property agent licence

Licence term (select one)					
1 year	<input type="checkbox"/>	3 years	<input type="checkbox"/>	5 years	<input type="checkbox"/>
Licence class (select relevant class you are applying for)					
Business agent	<input type="checkbox"/>	Conveyancing agent	<input type="checkbox"/>		
Real estate agent	<input type="checkbox"/>	Real estate and business agent	<input type="checkbox"/>		
Licence details					
Licence number:			Expiry date:		
Applicant details					
Surname:			Date of birth:		
Given name/s:					
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:					
Employer details					
Are you currently carrying on business as a licensed agent on your own account?				Yes / No	
If yes, go to principle place of business. If no, fill in the below.					
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:		

Principle place of business				
Is your principle place of business address the same as above?				Yes / No
If no, complete below				
Business address:				
Suburb:		State:	Postcode:	
Does the applicant 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 below the details of other place of business. If more than one other places of business, copy and attach to application				
Details of other place of business				
Business manager name:		Licence number:		
Business name:				
Business number:				
Business address:				
Suburb:		State:	Postcode:	
Disclosures				
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> in the past 12 months?				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 in the past 12 months?				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				

Have you been 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> in the past 12 months, or have you had a licence, certificate or other authority suspended?		Yes / No
If yes, please provide details below		
Have you failed to pay a monetary penalty payable under the <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, in the last 12 months?		Yes / No
If yes, please provide details below		
If applicable, have you failed to provide the Board with an auditor's report required to be provided under the <i>Agents Licensing Act 1979</i> ?		Yes / No
If yes, please provide registration 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 business name extract (if applicable)	<input type="checkbox"/>	
Current photo ID attached - Passport, Australian driver's licence or evidence of age card	<input type="checkbox"/>	
Completed and signed employer declaration (if applicable)	<input type="checkbox"/>	
Completed and signed declaration and disclosure	<input type="checkbox"/>	

Privacy statement		
The Northern Territory Government complies with the Information Privacy Principles scheduled by the <i>Information Act 2002</i> .		
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:		
<ul style="list-style-type: none"> • 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: