# *Mutual Recognition (Northern Territory) Act*

Please print in block letters. If there is insufficient space, attach extra sheets. All questions must be answered and full particulars provided.

Once this application form is complete it must be lodged at a Territory Business Centre with the prescribed fee. For any enquiries relating to this application please contact (08) 8999 1800.

| **Application for Commercial and/or Private Agents Licence under Mutual Recognition** | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **Class of Licence** | | | | | | | | | |
| Please select the class of licence you are applying for | | | | | | | | | |
| Commercial Agent (Bond required) | | | | | | | |  | |
| Private Bailiff (Bond required) | | | | | | | |  | |
| Inquiry Agent | | | | | | | |  | |
| Process Server | | | | | | | |  | |
| 1. **Applicant details** | | | | | | | | | |
| Title | Mr  Mrs  Ms  Miss | | | | | | | | |
| Surname |  | | | | | | | | |
| Given name(s) |  | | | | | | | | |
| Date of birth  (must be over 18 years and provide evidence in form of passport or driver’s licence) | | | | | |  | | | |
| Residential address | |  | | | | | | | |
| Postal address  (all notices will be sent to this address) | |  | | | | | | | |
| Telephone | |  | Facsimile |  | | | | | |
| Mobile | |  | Email |  | | | | | |
| 1. **Business details** | | | | | | | | | |
| Do you intend, if the licence is granted, to carry on business on your own account? | | | | | | | Yes | | No |
| If **no**, please provide details of your employer – **proceed to question 4** | | | | | | | | | |
| If **yes**, do you intend to use a Business or Trading Name? | | | | | | | Yes | | No |
| If **yes**, please provide details of the registered Business Name. | | | | | | | | | |
| Business name | |  | Business number | |  | | | | |
| Business address | |  | | | | | | | |
| Telephone | |  | Facsimile |  | | | | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **Name and address of employer (not required to be completed for sole trader)** | | | | | | | | | | | | | | | | | | | | | | | |
| Name of employer | | |  | | | | | | | | | | Licence number  (if applicable) | | | | | | | |  | | |
| Business address | | |  | | | | | | | | | | | | | | | | | | | | |
| Telephone | | |  | | | | Facsimile | | |  | | | | | | | | | | | | | |
| Email | | |  | | | | | | | | | | | | | | | | | | | | |
| 1. **Details of current equivalent registration** | | | | | | | | | | | | | | | | | | | | | | | |
| I currently hold licence(s) in the jurisdiction(s) indicated below, and attach a certified copy of my current licence (refer to application notes). | | | | | | | | | | | | | | | | | | | | | | | |
| States/Territory | Licence held | | | | | | | | Licence number | | | | | | Expiry date | | | | | | | | |
| **ACT** |  | | | | | | | |  | | | | | |  | | | | | | | | |
| **NSW** |  | | | | | | | |  | | | | | |  | | | | | | | | |
| **QLD** |  | | | | | | | |  | | | | | |  | | | | | | | | |
| **SA** |  | | | | | | | |  | | | | | |  | | | | | | | | |
| **TAS** |  | | | | | | | |  | | | | | |  | | | | | | | | |
| **VIC** |  | | | | | | | |  | | | | | |  | | | | | | | | |
| **WA** |  | | | | | | | |  | | | | | |  | | | | | | | | |
| **NZ** |  | | | | | | | |  | | | | | |  | | | | | | | | |
| 1. **Disclosures** | | | | | | | | | | | | | | | | | | | | | | | |
| Please complete the following questions. If you answer **yes** to any of the questions, please provide full details on a **separate sheet as an attachment.** | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Are you the subject of any special condition(s) that apply to your licence in any Australian State, Territory or New Zealand? | | | | | | | | | | | | | | | | | | | Yes | | | | No |
| 1. Are you the subject of any disciplinary proceedings in any Australian State, Territory or New Zealand (including any preliminary investigations or actions that might lead to disciplinary proceedings) in relation to this occupation? | | | | | | | | | | | | | | | | | | | Yes | | | | No |
| 1. Has your licence in another Australian State, Territory or New Zealand been cancelled or suspended as a result of disciplinary proceedings? | | | | | | | | | | | | | | | | | | | Yes | | | | No |
| 1. Are you prohibited or restricted from carrying on the occupation of this or an equivalent occupation in any Australian State, Territory or New Zealand for which licence is sought? | | | | | | | | | | | | | | | | | | | Yes | | | | No |
| 1. Are you subject to any special condition in carrying out the specified occupation(s) as a result of criminal, civil or disciplinary proceedings in any Australian State, Territory or New Zealand? | | | | | | | | | | | | | | | | | | | Yes | | | | No |
| **7. Declaration** | | | | | | | | | | | | | | | | | | | | | | | |
| I do solemnly declare that, in relation to my notice seeking mutual recognition for a licence:   1. I am licensed as specified in section 4; 2. I am seeking to be registered in the NT in accordance with the mutual recognition principle; 3. I have specified in section 4 all of the substantive licences (however called) that I hold in any Australian State, Territory or New Zealand which are equivalent to commercial and / or private agent licence under the law of the Northern Territory; 4. I have specified in section 5 any special condition to which I am subject in carrying on the occupation; 5. I consent to the making of inquiries of and the exchange of information with, the authorities of any Australian State, Territory or New Zealand, regarding my activities in the occupation, and otherwise in respect of matters relevant to this notice.   I solemnly and sincerely declare that the statements and information contained in this application are true and correct to the best of my knowledge and belief. I acknowledge that a person wilfully making a false statement in a statutory declaration is guilty of an offence and is liable to a penalty or imprisonment, or both. | | | | | | | | | | | | | | | | | | | | | | | |
| Declared at (insert location) | | | |  | | | | | | | on  (insert date) | | | | | | | | |  | | | |
| Signature of person making declaration | | | |  | | | | | | | | | | Date | | | | | |  | | | |
| Signature of witness\* | | | |  | | | | | | | | | | Date | | | | | |  | | | |
| Full name of witness\* | | | |  | | | | | | | | | | | | | | | | | | | |
| \*This Declaration may be made before any person who has attained the age of (18) eighteen years. | | | | | | | | | | | | | | | | | | | | | | | |
| **8. Privacy statement** | | | | | | | | | | | | | | | | | | | | | | | |
| The Department of Business complies with the Information Privacy Principles scheduled by the *Information Act*. | | | | | | | | | | | | | | | | | | | | | | | |
| **9. Supporting documentation** | | | | | | | | | | | | | | | | | | | | | | | |
| The following documents are required to be lodged with the application: | | | | | | | | | | | | | | | | | | | | | | | |
| Copy of current interstate licence as indicated in section 4 of this form. | | | | | | | | | | | | | | | | | | | | | |  | |
| Current photographic identification | | | | | | | | | | | | | | | | | | | | | |  | |
| Copy of current bond (required for Commercial Agent and Private Bailiff licence classes – refer to Section 11 - Application notes for more information) | | | | | | | | | | | | | | | | | | | | | |  | |
| 2 Copies of current passport photographs | | | | | | | | | | | | | | | | | | | | | |  | |
| **10. Fees and payment options** | | | | | | | | | | | | | | | | | | | | | | | |
| Contact your local Territory Business Centre for the relevant schedule of fees. | | | | | | | | | | | | | | | | | | | | | | | |
| Cash - Territory Business Centre | | | | | | | | | | | | | | | |  | | | | | | | |
| Cheque - payable to **RTM** | | | | | | | | | | | | | | | |  | | | | | | | |
| Credit card | | | | | | Visa  MasterCard | | | | | | | | | | | | | | | | | |
| Credit card number | | | | | |  | | | | | | | | | | | | | | | | | |
| Expiry date | | | | | |  | | | | | | | | | | | | | | | | | |
| Name on card | | | | | |  | | | | | | | | | | | | | | | | | |
| I hereby authorise the Territory Business Centre to debit the above credit card for the amount of | | | | | | | | | | | | | | | | | $ | | | | | | |
| Amount in words | |  | | | | | | | | | | | | | | | | | | | | dollars | |
| Signature of cardholder | | | | |  | | | | | | | Date | | | | | |  | | | | | |
| Contact phone number | | | | |  | | | | | | | | | | | | | | | | | | |
| **11. Application notes** | | | | | | | | | | | | | | | | | | | | | | | |
| A bond is required only for commercial agent and private bailiff categories and proof of currency of the bond must be lodged with the application.  Where the agent proposes to carry on or is carrying on business in partnership with another person, the bond is $1,500  Where the agent proposes to carry on or is carrying on business as an individual, the bond is $1,000 | | | | | | | | | | | | | | | | | | | | | | | |
| Under the *Mutual Recognition Act 1992* (*Cwth)* if you have an occupational licence or registration issued in a State or Territory of the Commonwealth you are entitled to have that licence or registration recognised in the Northern Territory under most, but not all, circumstances.  If you have any queries regarding this process, please contact the Territory Business Centre. | | | | | | | | | | | | | | | | | | | | | | | |
| **12. Lodgement options** | | | | | | | | | | | | | | | | | | | | | | | |
| Applications can be lodged at a Territory Business Centre with the prescribed fee at: | | | | | | | | | | | | | | | | | | | | | | | |
| **Darwin**  Darwin Corporate Park  Ground Floor, Building 3  631 Stuart Highway Berrimah  GPO Box 9800  Darwin NT 0801  t: (08) 8982 1700  f: (08) 8982 1725  Toll free: 1800 193 111  e: territory.businesscentre@nt.gov.au | | | | | | | | **Katherine**  Shop 1, Randazzo Building  18 Katherine Terrace  Katherine  PO Box 9800  Katherine NT 0851  t: (08) 8973 8180  f: (08) 8973 8188  e: [territory.businesscentre@nt.gov.au](mailto:territory.businesscentre@nt.gov.au) | | | | | | | | | | | | | | | |
| **Tennant Creek**  Shop 2, Barkley House  Cnr Davidson and Paterson Streets  Tennant Creek  PO Box 9800  Tennant Creek NT 0861  t: (08) 8962 4411  f: (08) 8962 4413  e: [territory.businesscentre@nt.gov.au](mailto:territory.businesscentre@nt.gov.au) | | | | | | | | **Alice Springs**  Peter Sitzler Building  67 North Stuart Highway  Alice Springs  PO Box 9800  Alice Springs NT 0871  t: (08) 8951 8524  f: (08) 8951 8533  e: [territory.businesscentre@nt.gov.au](mailto:territory.businesscentre@nt.gov.au) | | | | | | | | | | | | | | | |