# Information Relating to Applications

This form is to be used by an individual to apply to the Director of Fisheries to be considered as a “fit and proper person” under the Northern Territory’s *Fisheries Act*.

This is an Application only: you are not permitted to carry out any activities in relation to this application until you have been advised of the decision. Application forms that are incomplete will be returned to the applicant and cannot be processed until completed.

**Applying to be considered a fit and proper person**

Section 17B of the Act sets out the criteria an applicant will be assessed against to determine if the individual is a “fit and proper person” for the Director to approve or refuse the person as an Approved Operator. This provision of the *Fisheries Act* is set out below.

**Fisheries Act**

**Section 17B – Fit and proper person test**

An individual is a ***fit and proper*** [***person***](http://www.austlii.edu.au/au/legis/nt/num_act/flaa201623o2016348/s21.html#person)if the individual:

(a) is an adult; and

(b) does not hold a licence or permit, or a licence or other authority relating to fishing under an Act of the Commonwealth, a State or another Territory, that is currently suspended; and

(c) has not been found guilty of an offence against this Act, or any other Act that the Director considers relevant, in the previous 5 years; and

(d) has otherwise complied with this Act; and

(e) is otherwise a fit and proper [person](http://www.austlii.edu.au/au/legis/nt/num_act/flaa201623o2016348/s21.html#person) to be an approved operator taking into account any matters specified in the Ministerial guidelines\*.

\* Copies of the Ministerial guidelines may be available upon request from the Fisheries Licensing Office.

**Misleading Information**

Under section 35A of the *Fisheries Act* making false or misleading statements in applications is an offence.

**Privacy Statement**

Details in this application will be recorded in a Fisheries Register and certain personal details may be released, but will only be done so, in accordance with section 9 of the *Fisheries Act*.

For any queries please contact the Fisheries Licensing Office on (08) 8999 2183.

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| **Office Address:** | **Contacts:** | **Postal Address:** Fisheries Licensing |
| Fisheries Building | Tel: (08) 8999 2183 | Department of Industry, Tourism |
| 33 Vaughan Street | Fax: (08) 8999 2057 | and Trade |
| Berrimah Business Park | Email: Fisherieslicensing@nt.gov.au  | GPO Box 3000 |
| BERRIMAH NT 0828 |  | DARWIN NT 0801 |

Please provide **FULL** details of all findings of guilt by a court\* recorded against you, or infringement notices\*\* issued to you, in any State, Territory or Commonwealth jurisdiction. Please include the date, details of the offence(s) and penalty(ies) imposed and, for court matters, include the hearing date and the court in which the matter proceeded. If there is insufficient space below, please attach a separate sheet with the necessary information. If you have no findings of guilt or infringement notices or are unsure, in the box below write the word **NIL** or write something in regards to your police check ie. See attached Police check, refer to police check etc.

**IMPORTANT – PLEASE NOTE THAT THE INFORMATION YOU PROVIDE WILL BE CHECKED WITH THE RELEVANT AUTHORITIES. FAILURE TO DISCLOSE ANY INFORMATION RELATING TO PREVIOUS OFFENCES, IRRESPECTIVEOF WHEN THEY OCCURRED, MAY AFFECT YOUR APPLICATION.**

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\*Findings of guilt by a court are **NOT** limited to fisheries offences.

\*\*Infringement notices are limited to fisheries offences under the Fisheries Act, or Fisheries Regulations or equivalent laws in the Northern Territory, Commonwealth, or another State or Territory.

**Declaration and consent**

1. I declare that the information contained in this application is true and correct.
2. I agree to notify the Director of Fisheries in writing as soon as I become aware of a change in my circumstances.
3. I consent to the Department of Industry, Tourism and Trade to seek copies of information or records held by any Federal or State fisheries, quarantine, environmental or business licensing or registration agency for the purpose of verifying the information provided in this form and determining the application.
4. I acknowledge that a copy of this form will be retained by the Fisheries Division of the Department of Industry, Tourism and Trade.

Full name of person making this declaration Date of birth

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Signature of person making this declaration Date

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| **OFFICE USE ONLY**This Applicant is considered: FIT AND PROPER / NOT FIT AND PROPER |
|  |  |
| Director of Fisheries or Delegate Date |