

APPLICATION FOR NEW/ RENEWAL RESPONSIBLE WORKERS Under an existing Security-sensitive Dangerous Substances Permit

Security-sensitive Dangerous Substances Act 2005

Responsible Worker Details

<input type="checkbox"/> New application	<input type="checkbox"/> Renewal	Card Number <input type="text"/>	Surname <input type="text"/>
Drivers Licence		Given Names <input type="text"/>	
Number <input type="text"/>	State <input type="text"/>	Date of Birth <input type="text"/>	
Place of birth			
Suburb <input type="text"/>	State <input type="text"/>	Country <input type="text"/>	
Home Phone <input type="text"/>	Mobile <input type="text"/>	Email <input type="text"/>	
Street Address <input type="text"/>			Post Code <input type="text"/>
Postal Address <input type="text"/>			Post Code <input type="text"/>
Position/Occupation <input type="text"/>			
Activity required on Responsible Worker Card			
<input type="checkbox"/> Transporting	<input type="checkbox"/> Storing	<input type="checkbox"/> Buying	<input type="checkbox"/> Selling/Supplying
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Using/Disposing	<input type="checkbox"/> Importing	<input type="checkbox"/> Exporting

SSDS Permit Holder Details

SSDS Permit Number <input type="text"/>	
Company Name <input type="text"/>	
Supervisor Name <input type="text"/>	Contact Number <input type="text"/>
Supervisor Email <input type="text"/>	
Site Address <input type="text"/>	
Postal Address <input type="text"/>	

Approval of Responsible Worker Nomination

Supervisor's signature

Personal information we collect from you will be used by the Delegate of the Competent Authority for dangerous goods licensing purposes and may be used for other purposes permitted by the *Security-sensitive Dangerous Substances Act 2005* and associated laws. Failure to provide this information may result in your application being denied or records not being properly maintained. Your personal information may be disclosed to contractors and agents of WorkSafe Tasmania, law enforcement agencies, courts and other public sector bodies or organisations authorised to collect it. This information will be managed in accordance with the Personal Information Protection Act 2004 and may be accessed by you on request to this Department. You may be charged a fee for this service.

Statutory Declaration

Are you the subject of any traffic violation, criminal or traffic charge(s) still pending before a Court? Yes No

Have you been convicted, or are you the subject of any matter under investigation, or pending a hearing?

a) of any criminal or police related offences under International, Federal, Australian State or Territory Statute?

b) of any offences under any occupational health and safety, explosives or dangerous goods legislation? Yes No

if yes provide details

Have you either;

a) been refused an authority, permit or licence to undertake an activity with a dangerous substance in an Australian State or Territory; or

Yes No

b) had any authority, permit or licence cancelled or suspended by another State or Territory regulatory authority?

if yes provide details

Are you currently subject to a restrictive personal order? e.g family violence order, interim family violence order, restraint order, interim restraint order

Yes No

if yes provide details

Have you;

ever been diagnosed with a psychiatric illness? Yes No

if yes, are you currently suffering from a psychiatric illness? Yes No

if yes, are you receiving medical treatment? Yes No

I, the undersigned, do solemnly and sincerely declare that the information contained in this application form is true and correct. I make this solemn declaration under the Oaths Act 2001.

Signature of Applicant

Date

Declared at

Before me

(Justice of the Peace/Commissioner for Declarations/or Authorised Person) (I have sighted documents to verify the identity of this person named in this application)

Consent Form:

Background Check Tasmania & National Police Record & Politically Motivated Violence Check

Surname	Given Names
<input type="text"/>	<input type="text"/>

Date of Birth

Previous or alternative names (including maiden name)

Permanent residential addresses over the last ten years	If actual dates are unavailable, details of year of residence will suffice	
	from	to
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Statement of Consent and Indemnity

I hereby certify that the details provided on this form are correct and I consent to a check of the records of Tasmania Police, other Australian police jurisdictions, Australian Federal Police and the Australian Security Intelligence Organisation (ASIO) for the purpose of conducting a security assessment.

I hereby indemnify the services of CrimTrac Agency, other police jurisdictions and the State of Tasmania, its servants or agents including all members of the Department of Police and Emergency Management, and AFP/ASIO against all actions, suits, proceedings, causes of action, costs, claims and demands whatsoever that may be brought or made against it or them by anybody or person be reason of, or arising out of, the release of police records recorded against my name or purporting to either relate to or concern me. I request the above release of criminal history records recorded against my name be provided to the regulator, WorkSafe Tasmania.

Declaration

Name	Signature	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>