

Form guide - Application for asbestos assessor licence

This guide is designed to assist you in completing the form 'Application for asbestos assessor licence', if you have further questions in relation to this material please contact Workplace Health and Safety Queensland (WHSQ) on 1300 655 986.

The document 'GUIDE FOR APPLICANTS FOR ASBESTOS REMOVAL AND ASBESTOS ASSESSOR LICENCE and NOTIFICATIONS - of asbestos removal work, asbestos fibres and emergency demolition of structures containing asbestos' should be read in order to understand the obligations, responsibilities and rights under the *Work Health and Safety Regulation 2011* in relation to who can apply for an asbestos assessor licence, the application process and processing, as well as the work undertaken by an individual who holds an asbestos assessor licence.

In order for WHSQ to accept your application, the form must be completed correctly, all supporting documentation must be provided and payment of the prescribed fee must be included. Failure to do so will delay the processing of your application.

1. Details of applicant

Name and date of birth:

- Provide your current surname, title and given names in the boxes provided.
- Your title, family/surname and your first given name are mandatory fields and must be completed.
- You must provide your date of birth to assist WHSQ in identifying you.

Address

- All written correspondence sent will be for the individual who is the/proposed licence holder; therefore you must enter your address details as the holder of the licence.
- Provide your current details, whether a residential or business address, by completing the unit and/or street number, street name, suburb, state and postcode fields.
- You must be a resident of Queensland, or satisfy WHSQ that circumstances exist that justify the issue of the licence in Queensland.
- Your address provided must be a Queensland address and cannot be a PO Box. Suburb, state and postcode are mandatory fields and must be completed.

Contact details

- You must provide at least one contact telephone number.
- If you supply a mobile number and email address, this will enable WHSQ to more easily contact you if there are any queries with your application or any important information about your licence.

Postal address

 Only provide the postal address details if your postal address is different to your residential/business address, otherwise, cross the box and leave the remaining boxes blank.

2. Additional information

- Cross 'No' or 'Yes' to each question.
- If you cross 'Yes' supply the information requested as it applies to you.
- Having a licence suspended or cancelled, or having a conviction does not automatically exclude you from holding an asbestos assessor licence.
- Each application will be assessed on the details provided. However you may be contacted to supply further information.
- It is an offence under the *Work Health and Safety Act 2011* to provide false or misleading information when applying for an asbestos assessor licence.
- Section 271 of the Work Health and Safety Act 2011 permits the release of information by Workplace Health and Safety
 Queensland as the regulator that is necessary for the recognition of authorisations under a corresponding WHS law or is
 required for the exercise of a power or function under a corresponding WHS law.

3. Declaration by applicant

- Make sure you read and understand the declarations before you sign.
- The declaration must be signed by the individual making the application.

4. Checklist of documents required

Workplace Health and Safety Queensland's criteria to operate as an asbestos assessor require that applicants for an Asbestos Assessor licence must:

- 1. Provide a copy of a certificate of the national unit/s of competency for asbestos assessor work issued not more than 60 days before the date of the application for an asbestos assessor licence; **or**
- 2. Submit evidence of the successful completion of a tertiary qualification in occupational health and safety or industrial hygiene or science or building construction or environmental health.
- 3. Provide documented evidence describing work experience in performing or supervising the work of an asbestos assessor (i.e. air monitoring, clearance inspections and issue of clearance certificates) over the preceding two years prior to submitting this application. The description should include the name and contact telephone numbers of referees.
- 4. Provide a copy of the applicant's current Queensland driver's licence or a driver's licence of another state territory. If this type of identification is not available, any other form of government issued photographic identity is acceptable.

5. Fee

The payment details for the specific fee must be included with the licence application.

The fee for an Asbestos Assessor licence is \$152.00

Lodging your application form

In order to process the application WHSQ must receive the following at the time of lodgement of the application:

- 1. The complete Application for asbestos assessor licence.
- 2. All appropriate documentation relevant to the licence being applied for (refer to the document checklists on the form and this guide).
- 3. Payment of the applicable fee.

It is an offence under the *Work Health and Safety Act* 2011 to provide false and misleading information in the application or in any documents submitted in support of the application.

Submitt the application to WHSQ by:

Post: Licensing Services

Workplace Health and Safety Queensland

PO Box 820, Lutwyche 4030,

QLD

Fax: (07) 3247 9433

Scan and email: WHSQLicensing@justice.qld.gov.au



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This form is to be completed in accordance with the relevant guidelines. The guidelines are available at **www.worksafe.qld.gov.au** or by phoning the department's Infoline on 1300 655 986.

1.	Details of applica	ant				
Title (N	fr, Mrs, Miss, Ms)	Family name/Surna	ame			
First gi	ven name		Second g	jiven name (if applicable	:)	
Date of	f birth (DD/MM/YYYY)					
	s (must be an Australian address mber/Street number/Street name					
OTHE HE	imber/otreet number/otreet name					
Suburb	/ Locality			State		Postcode
	, , , , , , , , , , , , , , , , , , ,					
Teleph	one	Mobile		Facsimile		
Email a	address (if applicable)					
Postal	address (must be an Australian a	ddress)				
X Cr	oss this box if your postal add	dress is the same as your a	address above			
PO Bo	x number	GPO Box number	Private	e Bag number	Locker	d Bag number
Suburb	/ Locality			State		Postcode
_	A 1 11.1.					
2.	Additional inform	iation				
Has th	ne applicant been found guilty	of an offence under the W	ork Health and Sa	afety Act 2011 or Wor	k Health and S	Safety Regulation
2011	or under the work health and	safety law of another state	or territory or the 0	Commonwealth?		, 0
No X	Yes					
(If yes	s, provide details)					
	ne applicant been found guilty ction Act 1994?	of an offence in relation to	the unlawful dispo	osal of hazardous wa	ste under the	Environmental
7						
No Z	Yes Y					
(II yes	s, provide details)					

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- 3. Provide documented evidence describing work experience in performing or supervising the work of an asbestos assessor (i.e. air monitoring, clearance inspections and issue of clearance certificates) over the preceding two years prior to submitting this application. The description should include the name and contact telephone numbers of referees.
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	the applicant been disqualified from holding an equivalent licence by another state or territory or the Commonwealth work health safety regulator?
No (If ye	Yes Yes
Work No	the applicant previously had an equivalent licence refused, suspended or cancelled under the <i>Work Health and Safety Act 2011</i> or <i>k Health and Safety Regulation 2011</i> or under the work health and safety law of another state or territory or the Commonwealth? Yes Yes Res, provide details)
Has 1	the applicant entered into an enforceable undertaking under the <i>Work Health and Safety Act 2011</i> or the work health and safety law other state or territory or the Commonwealth? Yes
	es, provide details)
Has 1	the applicant previously held a similar licence under a corresponding work health and safety law in respect of which a condition has imposed?
No 🏻	Yes
	es, provide details)
3.	Declaration by applicant
l dec	lare that:
•	the information supplied in this application is true and correct to the best of my knowledge.
•	none of the information supplied by me in this application or in any documents attached to or submitted in support of this application is false or misleading in any material particular.
•	in making this application I have not failed to provide any material information relating to the matters addressed above.
•	I acknowledge that it is an offence under the Work Health and Safety Act 2011 to provide false and misleading information in this application or in any documents submitted in support of this application.
•	I do not hold an equivalent licence granted by a corresponding regulator under a corresponding work health and safety law.
	sent to Workplace Health and Safety Queensland making enquiries and exchanging information with work health and safety lators in other states, territories or the Commonwealth regarding any matter relevant to this application.
	Dated
	Name in full(Please Print) Signature

PRIVACY STATEMENT: The Department of Justice and Attorney-General is collecting your personal information in order to process your application for asbestos assessor licence in accordance with the *Work Health and Safety Act 2011*. It is the department's usual practice to disclose this information to the applicable Commonwealth, state or territory work health and safety regulator/s in order to obtain information relevant to making a decision on your application. Details of licensed asbestos assessors are published in a publicly available register under section 528 of the *Work Health and Safety Regulation 2011*. Your personal information will not be otherwise disclosed to third parties without your consent or unless authorised or required by law.

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4.	Checklist of documentation required
X	 Copy of: the certification held by the applicant for the specified VET accredited course for asbestos assessor work, or evidence of tertiary qualification in occupational health and safety, or industrial hygiene or science or building construction or environmental health.
X	Documents evidencing acquisition of knowledge and skills of asbestos removal industry practice acquired through training or experience.
X	Copy of identity documents
5.	Fee
provid	der for your application to be accepted, the form must be completed correctly, all supporting documentation must be ded and payment of the prescribed non-refundable application fee must be included. Failure to do so will delay the essing of your application.
Γhe re	elevant fee is specified in the guidelines and is not subject to GST.
Z PI	lease cross this box if a receipt is required.
	ess receipt is to be sent to (if different to address stated in Section 2)
144101	
	Street number Street name
_	Suburb State Postcode
\ Ih	have enclosed a cheque or money order (cheques should be made out to Department of Justice and Attorney General), or
Pl	lease debit my credit card for the amount of \$
	Name on card
	Cardholder's signature
Please	e note the following payment details will be destroyed once payment has been approved and receipted.
	Card: VISA Mastercard
	Card number
	Expiry Date
to se	end the completed and signed form: Scan and email: Fax: Post:

Whe

WHSQLicensing@justice.qld.gov.au

07 3247 9453

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PO Box 820
Lutwyche QLD 4030