

Form 18B

Application for a restricted Queensland electrical contractor licence

V 1.07.2017

Electrical Safety Act 2002

All business, company and trading names must be registered with the Australian Securities and Investments Commission.

NOTE: The nominated qualified technical person (QTP) and qualified business person (QBP) must be either:

- for a sole trader – the applicant or an employee
- for a partnership – a partner or employee
- for a corporation – an executive officer or employee of the corporation.

Please complete all fields in **BLOCK LETTERS**

Section 1 Applicant details

What scope of electrical work will be carried out under the licence

- restricted (limited to the scope of work permitted by the nominated qualified technical person)
- testing and tagging work only
- electrical work carried out as a practising electrical engineer

Will the legal entity be conducting the business as: <input type="checkbox"/> a corporation <input type="checkbox"/> a partnership <input type="checkbox"/> an individual	
Legal name	
ACN	ABN

Note: The ACN and ABN must be attached to the legal name entered above. Corporations must supply an ACN

Registered business/Trading name/s

Section 2 Contact details

You must provide a current email address to receive electrical licence renewal information

Phone	Mobile
Email	

Your business and postal address must be within Australia

Business address (cannot be a PO BOX)

Unit/Building No.	Street No.	Street Name		
Suburb/Town/Locality		State	Postcode	

Is your postal address the same as your business address above? YES NO

If NO please provide the following details

Postal address

Unit/Building No.	Street No.	Street Name/PO Box		
Suburb/Town/Locality		State	Postcode	

Section 3 Insurance requirements

The applicant must hold the relevant insurance required under s51 of the *Electrical Safety Regulation 2013*. The policy must be held in the legal name under which the application is made. Please provide details of your insurance policy below.

You are not required to provide copies of your insurance certificate with this application

Have you confirmed with your insurer that your insurance policy meets the requirements of s51 of the <i>Electrical Safety Regulation 2013</i> ?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Name of insurer	
Policy number	Expiry date

Section 4 Qualified technical person (QTP)

4.1 QTP details

Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other		
Family name		
Given name/s		
Middle name/s		
Date of birth	Phone number	Email

4.2 QTP history

	YES	NO
Have you been refused or disqualified from holding an electrical licence/registration in Queensland or any other jurisdiction?	<input type="checkbox"/>	<input type="checkbox"/>
Have you had an electrical licence/registration cancelled or suspended in Queensland or any other jurisdiction?	<input type="checkbox"/>	<input type="checkbox"/>
Have you been subject to disciplinary action under the <i>Electrical Safety Act 2002</i> or corresponding law of another jurisdiction?	<input type="checkbox"/>	<input type="checkbox"/>
Have you been issued with an improvement notice, electrical safety protection notice or infringement notice for which there is outstanding payment or rectification?	<input type="checkbox"/>	<input type="checkbox"/>
If you have answered YES to any of the above questions you will be contacted for further information.		

4.3 QTP eligibility

To be eligible you must:

- hold a Queensland electrical work licence, or
- have completed UEENEEPo26 (for testing and tagging only), or
- be an RPEQ registered practising electrical engineer

<input type="checkbox"/> I hold an Queensland electrical work licence number	Expiry date
<input type="checkbox"/> I do not hold an Queensland electrical work licence. I am applying for a restricted electrical work licence for testing and tagging work only. <ul style="list-style-type: none">• Provide a copy of your statement of attainment for UEENEEPo26.	
<input type="checkbox"/> I do not hold an Queensland electrical work licence. I am a RPEQ registered practising electrical engineer. <ul style="list-style-type: none">• Provide a copy of your engineering qualification.	
RPEQ registration number	Expiry date

4.4 Declaration by QTP

declare that:

- I am a fit and proper person and competent to perform the technical aspects of electrical work as, or for, a licensed electrical contractor
- I agree to be the nominated qualified technical person for the applicant.
- the information provided by me for this application is true and correct to the best of my knowledge.

I am aware that I should inform the Electrical Safety Office if I cease to be the qualified technical person or no longer wish to be the qualified technical person for this contractor licence.

Signature	Date
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For more information on the role of the QTP, visit our website [here](#).

Section 5 Qualified business person (QBP)

5.1 QBP details

Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other		
Family name		
Given name/s		
Middle name/s		
Date of birth	Phone number	Email

5.2 QBP history

	Yes	No
Have you ever been subject to actions under part IX or X of the <i>Bankruptcy Act 1966</i> ?	<input type="checkbox"/>	<input type="checkbox"/>
If you answered Yes, have you been discharged from the bankruptcy? • Provide evidence of your discharge.	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been a director or a manager of a company which is subject to a winding up order, placed in receivership or administration, or under official management, had a controller appointed, or entered into other arrangements with creditors due to insolvency?	<input type="checkbox"/>	<input type="checkbox"/>
Have you been convicted of any criminal offence (excluding traffic offences) relating to honesty within the last ten years e.g. fraud or stealing?	<input type="checkbox"/>	<input type="checkbox"/>
Have you been convicted of an offence under section 596 of the <i>Corporations Act 2001 Cth</i> ?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been disciplined by any Committee, Tribunal or Court in relation to the performance of electrical work in Queensland or any other jurisdiction?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever had a pending or current disciplinary proceeding by any Committee, Tribunal or Court in relation to the performance of electrical work in Queensland or any other jurisdiction?	<input type="checkbox"/>	<input type="checkbox"/>

If you answered YES to any of the above questions you will be contacted for further information.

5.3 QBP eligibility

<input type="checkbox"/>	I have completed one of the following courses within the last three years. <input type="checkbox"/> UEENEEG175A <input type="checkbox"/> BSBSMB401A • Provide a copy of your statement of attainment.
<input type="checkbox"/>	I have been operating a business for a period of, or periods totalling, five years. • Provide a statutory declaration from your accountant/employer/manager detailing your business experience.

5.4 QBP proof of identification

<input type="checkbox"/>	I hold a Queensland electrical work licence. (Provide your licence number below); OR
<input type="checkbox"/>	I have provided certified copies of proof of identity in accordance with Table 1
Queensland electrical work licence number:	Expiry date

5.5 Declaration by QBP

I declare that:

- I am a fit and proper person and competent to perform the business aspects of electrical work as, or for a licensed electrical contractor.
- I agree to be the nominated qualified business person for the applicant.
- the information provided by me for this application is true and correct to the best of my knowledge.

I am aware that I should inform the Electrical Safety Office if I cease to be the qualified business person or no longer wish to be the qualified business person for this contractor licence.

Signature	Date
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For more information on the role of the QBP, visit our website [here](#).

Section 6 Authorised parties

The Electrical Safety Office can only deal with parties authorised to act on behalf of the licence holder. If you wish to nominate parties to act on your behalf please provide their details. Nominated parties will remain authorised until you advise the Electrical Safety Office of their removal.

Name			
Position			
Signature			

Section 7 Declaration by licence applicant

The declaration can only be signed by:

- for a sole trader - the applicant
- for a partnership - a partner of the partnership
- for a corporation - a director or executive officer of the corporation.

Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other	
Family name	
Given name/s	
Middle name/s	
Phone number	Email

I declare that:

- I am authorised to sign this application.
- The information contained in this application and all attachments are true and correct to the best of my knowledge.

Signature	Date
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Section 8 Fees

Your application will not be processed until the prescribed fee has been paid.

Please refer to the "Fee Schedule" on the Electrical Safety Office website www.electricalsafety.qld.gov.au

Please indicate your preferred method of payment.

Your receipt will be sent to the postal address provided. If you wish for your receipt to be sent to a different address, provide the alternate address below or advise the receiving officer at the time of payment.

Our office will retain part of the fee paid to offset processing costs if an application is refused or withdrawn. The refundable amount of the fee paid is shown in schedule 8 of the Electrical Safety Regulation 2013, available on the Electrical Safety Office website at www.electricalsafety.qld.gov.au. For further information phone: 1300 362 128 (Australia only) or +617 3006 6714 (outside Australia).

<input type="checkbox"/> I have enclosed a cheque or money order with this application. Cheques and money orders are to be made payable to "The Electrical Safety Office".
<input type="checkbox"/> I wish to pay by credit card

NOTE: DO NOT PROVIDE YOUR CREDIT CARD DETAILS ON THIS FORM.

An officer from the Electrical Safety Office will contact you to arrange payment of your fees. To confirm their identity they will quote your name and ABN/ACN as per this application. If you are not provided this information do not proceed with the transaction.

Alternative receipting address

Unit/Building No.	Street No.	Street Name/PO Box
Suburb/Town/Locality	State	Postcode

Lodging your application

Please ensure you provide legible certified copies of any work licences, certificates or other records required and **certified copies** of proof of identification documents.

The preferred method of application is by email to LPS@oir.qld.gov.au

Alternatively, you may lodge your application by mail to:

Electrical Safety Office
Licensing Processing Services
PO Box 820
Lutwyche Qld 4030

or

Fax: (07) 3874 7670

Privacy statement

The Electrical Safety Office is collecting your personal information in order to process your application for an electrical work licence/permit in accordance with the *Electrical Safety Act 2002*. Our office may be required to disclose your personal information to other Australian and New Zealand electrical regulators or as otherwise required by law. Your information will be disclosed to a third party contractor to print and send you your licence card, and licence renewal requests. This information may also be used to provide you with electrical safety updates, for statistical research, for auditing purposes, evaluation and reporting of our services. This includes publishing your licence details on the Electrical Safety Office online register.

Table 1 Proof of identification

You are required to provide three certified copies of matching evidence of identity documents. The three documents can be made up of one category A + two category B OR two category A + one category B documents.

At least one category A document must be photographic and show a full name and date of birth (DOB).

Indicate by ticking the boxes which documents you have used to confirm your identity.

NOTE: If you are providing a credit/debit card as evidence of identity you must obscure the card number and expiry date.

Category A documents	Status
<ul style="list-style-type: none"> Australian Birth Certificate - full (not an Extract or a Commemorative Certificate) Bicentennial Birth Certificate (born in 1988) Australian Citizenship Certificate/Naturalisation Certificate Department of Immigration and Border Protection (DIBP) Certificate of Evidence of Resident Status Visa Evidence Card (with PLO56 Visa) Queensland or Federal police officer photo identity card. Queensland High Risk Work licence (photographic) 	<input type="checkbox"/> Current
<ul style="list-style-type: none"> Australian Passport (including Australian Document of Identity) Foreign Passport Australian photo driver licence Queensland Accreditation/Authorisation (laminated) Driver/rider trainer; pilot/escort vehicle driver; dangerous goods driver; tow truck driver/assistant certificate Bus; taxi; limousine driver 	<input type="checkbox"/> Current or expired less than two years
<ul style="list-style-type: none"> DIBP - ImmiCard; Temporary or Resident Visa; Document for travel to Australia. Note: Electronic Travel Authority (ETA) is not accepted. 	<input type="checkbox"/> Valid up to five years after issue
<ul style="list-style-type: none"> Queensland Card 18+ (laminated) 	<input type="checkbox"/> Issued after 01/01/1992

Category B documents – must be Australian issued documents	Status
<ul style="list-style-type: none"> Australian Defence Force photo identity card (excluding civilians) Australian Firearm Licence (with photo) Australian Security Guard/Crowd Controller Licence (with photo) Department of Veterans' Affairs/Centrelink Pensioner Concession Card (including Healthcare card) Education institution student identity document (must include photo and/or signature) Financial institution debit/credit card (must include signature and embossed/printed name) Medicare card (Green, Blue or Yellow) Interstate government-issued or government-approved Proof of Age Card 	<input type="checkbox"/> Current