

# Application for registration of plant design

Please complete a separate form for each design of plant

Guidelines for completing this form are also available online or by calling 1300 362 128.

## 1. Applicant details

Is this a modification to an existing design registration? (Tick appropriate box) No  Yes

|  |  |
|--|--|
| If Yes, existing Queensland design registration number |  |
|--|--|

### Applicant

(Full legal name of organisation for example sole trader, partnership or corporation)

|  |
|--|
|  |
|--|

Business/trading name/s

If the organisation (above) is trustee for a trust, include the name of trust here.

|  |
|--|
|  |
|--|

ABN

Is the applicant the (mark one of the following)

Owner  Designer  Manufacturer  Importer  Supplier

**Principal business address (should be a Queensland address and not a PO box):**

|   |       |          |
|---|-------|----------|
| Unit number / Street number / Street name |       |          |
| Suburb                                    | State | Postcode |

### Contact person

|                             |                     |
|-----------------------------|---------------------|
| Title                       | First given name    |
| Middle name (if applicable) | Family name/surname |

|                                 |                                  |               |
|---------------------------------|----------------------------------|---------------|
| Telephone (including area code) | Fax number (including area code) | Mobile number |
|                                 |                                  |               |

Email

|  |
|--|
|  |
|--|

**Postal address (should be a Queensland address)**

Tick this box if the postal address is the same as the address above

|                 |                |                    |                   |
|-----------------|----------------|--------------------|-------------------|
| PO box number   | GPO box number | Private bag number | Locked bag number |
| Suburb/locality | State          | Postcode           |                   |

## 2. Declaration of the applicant (duly authorised representative)

I declare that:

- an equivalent registration granted by a corresponding regulator under a corresponding work health and safety law is not held
- 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 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 consent to Workplace Health and Safety Queensland making enquiries and exchanging information with work health and safety regulators in other states, territories or the Commonwealth regarding any matter relevant to this application.

|                             |      |
|-----------------------------|------|
| Name in full (Please Print) |      |
| Signature                   | Date |

## 3. Details of plant

|   |  |
|---|--|
| Description of plant  |  |
| Name of manufacturer  |  |
| Manufacturer's model number   |  |
| Published technical standard(s) or engineering principle(s) used for the design |  |
| Representational drawing title  |  |
| Representational drawing number<br>Revision number or date                      |  |

Complete the subsection below that applies to the type of plant to be design registered.

If you need assistance with the information to be provided in the fields below discuss this with your design verifier or the designer of the plant.

### 3.1 Building maintenance unit

|  |                  |   |
|--|------------------|---|
| Rated capacity ( <i>in kilograms</i> ) | Number of people | Maximum working height ( <i>in metres</i> ) |
|--|------------------|---|

### 3.2 Concrete placement unit with delivery boom

|  |                                     |  |   |
|--|-------------------------------------|--|---|
| Maximum delivery rate<br>( <i>in cubic metres per hour</i> ) | Boom length<br>( <i>in metres</i> ) | Maximum flexible hose length<br>( <i>in metres</i> ) | Maximum concrete pumping pressure<br>( <i>in kilopascals or bar</i> ) |
|--|-------------------------------------|--|---|

### 3.3 Tower crane, mobile crane, gantry crane or bridge crane

Complete the relevant fields for the type crane to be design registered.

|   |   |  |  |
|---|---|--|--|
| Maximum rated capacity<br>( <i>in tonnes or kilograms</i> ) | Maximum boom length<br>( <i>in metres</i> )                               | Maximum radius<br>( <i>in metres</i> ) | Maximum freestanding height<br>( <i>in metres</i> )      |
| Load chart number   | Auxiliary hoist capacity (if fitted)<br>( <i>in tonnes or kilograms</i> ) | Maximum span<br>( <i>in metres</i> )   | Maximum hook height above ground<br>( <i>in metres</i> ) |

### 3.4 Boom-type elevating work platform

|   |  |  |  |
|---|--|--|--|
| Maximum rated capacity<br><i>(in kilograms)</i> | Maximum boom length<br><i>(in metres)</i>          | Maximum radius<br><i>(in metres)</i>                       | Maximum working height<br><i>(in metres)</i> |
| Insulation rating                               | Maximum chassis inclination<br><i>(in degrees)</i> | Maximum in-service wind speed<br><i>(in metres/second)</i> | Maximum number of people in platform         |

### 3.5 Workbox designed to be suspended from a crane

|   |                                    |   |                                 |
|---|------------------------------------|---|---------------------------------|
| Maximum rated capacity<br><i>(in kilograms)</i> | Tare mass<br><i>(in kilograms)</i> | Length X width of workbox<br><i>(in metres)</i> | Maximum number of people in box |
|---|------------------------------------|---|---------------------------------|

### 3.6 Hoist with a platform movement exceeding 2.4 metres, designed to lift people

|   |   |   |                                     |
|---|---|---|-------------------------------------|
| Maximum rated capacity<br><i>(in kilograms)</i> | Maximum travel height<br><i>(in metres)</i> | Maximum hoisting speed<br><i>(in metres per second)</i> | Number of people permitted on hoist |
|---|---|---|-------------------------------------|

### 3.7 Vehicle hoist

|   |   |   |   |
|---|---|---|---|
| Maximum rated capacity<br><i>(in kilograms)</i> | Maximum lift height<br><i>(in metres)</i> | Vehicle hoist type<br><i>(e.g. two or four post, scissor)</i> | Vehicle hoisting mechanism<br><i>(e.g. hydraulic, cable or screw)</i> |
|---|---|---|---|

### 3.8 Mast climbing work platform

|   |  |  |  |
|---|--|--|--|
| Maximum rated capacity<br><i>(in kilograms)</i> | Maximum working height<br><i>(in metres)</i> | Maximum in-service wind speed<br><i>(in metres per second)</i> | Maximum vertical travel speed<br><i>(in metres per second)</i> |
|---|--|--|--|

### 3.9 Lift

|   |   |                                      |  |
|---|---|--------------------------------------|--|
| Maximum rated load<br><i>(in kilograms)</i> | Number of people                            | Maximum travel<br><i>(in metres)</i> | Maximum speed<br><i>(in metres per second)</i> |
| Control type                                | Car floor area<br><i>(in square metres)</i> | Number of levels served              |  |

Type (tick to select) Passenger  Goods  Stairway/inclined  Service

### 3.10 Escalator or moving walk

|  |  |   |                                     |
|--|--|---|-------------------------------------|
| Rated capacity<br><i>(number of people per hour)</i> | Speed<br><i>(in metres per second)</i> | Angle of incline<br><i>(in degrees)</i> | Travel length<br><i>(in metres)</i> |
|--|--|---|-------------------------------------|

### 3.11 Prefabricated scaffold

Complete the relevant fields for the scaffold to be design registered.

|   |                                      |   |
|---|--------------------------------------|---|
| Duty<br><i>(light, medium or heavy)</i> | Maximum height<br><i>(in metres)</i> | Material<br><i>(Steel or aluminium)</i> |
|---|--------------------------------------|---|

### 3.13 Pressure equipment and gas cylinder

|   |   |   |  |
|---|---|---|--|
| Design Pressure<br><i>(in kPa or MPa)</i> | Test Pressure<br><i>(in kPa or MPa)</i>                               | Design temperature<br><i>(in degrees Celsius)</i> | Volume<br><i>(in litres or cubic metres)</i> |
| Hazard level                              | Rating (if applicable)<br><i>(in kilowatts or kilograms per hour)</i> | Material <i>(for gas cylinders only)</i>          |  |

### 3.14 Amusement device

|                                 |   |   |
|---------------------------------|---|---|
| Class<br><i>(under AS 3533)</i> | Ride name   | Minimum rider height<br><i>(height that allows patrons to ride)</i> |
| Fixed or mobile                 | Maximum speed of rider<br><i>(in metres per second)</i> | Maximum acceleration of rider<br><i>(in g)</i>                      |

#### OFFICE USE ONLY

#### Confirmation of design registration

This is to advise that the above plant design has been registered in accordance with the Work Health and Safety Regulation 2011. Each unit of plant manufactured and supplied to this design should be permanently and legibly marked with the plant design registration number below.

|                                  |               |      |
|----------------------------------|---------------|------|
| Plant design registration number | Registered by | Date |
|----------------------------------|---------------|------|

#### 4. Designer statement

##### Details of designer

|                              |                                  |                     |
|------------------------------|----------------------------------|---------------------|
| First given name             | Other given name (if applicable) | Family name/surname |
| Organisation or company name |                                  |                     |

##### Address

Unit number / Street number / Street name

|   |       |          |
|---|-------|----------|
| Unit number / Street number / Street name |       |          |
| Suburb                                    | State | Postcode |

Tick this box if the postal address is the same as the address above

|                |                 |                     |                    |
|----------------|-----------------|---------------------|--------------------|
| PO box number: | GPO box number: | Private bag number: | Locked bag number: |
| Suburb:        | State:          | Postcode:           |                    |

##### Details of plant

##### Description of plant

|   |  |
|---|--|
| Description of plant  |  |
| Name of manufacturer  |  |
| Manufacturer's model number   |  |
| Published technical standard(s) or engineering principle(s) used for the design |  |
| Representational drawing title  |  |
| Representational drawing number<br>Revision number or date                      |  |

#### 5. Declaration of designer

I declare that:

- I have complied with the designers duties under section 22 of the *Work Health and Safety Act 2011* in respect to the design of the plant
- the design was produced in accordance with the technical standard(s) or engineering principle(s) listed above.

|                                      |      |
|--------------------------------------|------|
| Name in full ( <i>please print</i> ) |      |
| Signature                            | Date |

#### Privacy statement

Workplace Health and Safety Queensland is collecting your personal information in order to process your application for design registration of plant in accordance with the *Work Health and Safety Act 2011*. It is our usual practice to disclose this information to the applicable Commonwealth, state or territory health and safety regulator/s in order to obtain information relevant to making a decision on your application. Our office may only disclose information with the authority of the applicant or as allowed in section 263 of the *Work Health and Safety Regulation 2011*.

## 6. Design verification statement

### Details of design verifier

|  |                     |
|--|---------------------|
| Title  | First given name    |
| Other given name (if applicable)   | Family name/surname |
| Qualifications or design experience relevant to this design (include professional association membership if applicable)  |                     |
| Organisation or company name   |                     |
| Were the designer and design verifier engaged by the same organisation? If Yes, please provide a copy of the certification of the quality management system. (Tick appropriate box).<br>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, provide certificate number and expiry date: |                     |

### Address

|   |       |          |
|---|-------|----------|
| Unit number / Street number / Street name |       |          |
| Suburb                                    | State | Postcode |

Did another person(s) assist with the design verification? If Yes, please provide additional copies of this page for each design verifier.

Yes  No

### Details of plant

|   |  |
|---|--|
| Description of plant  |  |
| Name of manufacturer  |  |
| Manufacturer's model number   |  |
| Published technical standard(s) or engineering principle(s) used for the design |  |
| Representational drawing title  |  |
| Representational drawing number<br>Revision number or date                      |  |

## 7. Declaration of design verifier

### I declare that:

- I am eligible to be a design verifier for the design of the plant
- the design was produced in accordance with the technical standard(s) or engineering principle(s) listed by the designer
- I have documented the process used to verify the design and the results of that process.

|                             |      |
|-----------------------------|------|
| Name in full (please print) |      |
| Signature                   | Date |

## Privacy statement

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# Checklist

To avoid delays in processing your application and confirm that your form is completely ready for submission, use this checklist.

## Section 1. Details of applicant

- Is this a modification to an existing Queensland design registration? If YES, have you stated the design registration number on the form?
- Have you completed all the fields in the applicant details section of the form?

## Section 2. Declaration of registration holder or applicant

- Queensland is the only State in which you have lodged an application for registration of plant design. If not and the plant design is registered elsewhere, **the application cannot be processed.**
- Has the applicant signed the declaration on page 2 of the form?

## Section 3. Details of plant

- Have you completed all the fields for details of plant including the subsections for the particular item of plant? For example, if the application is for a tower crane or mobile crane, complete the boxes in sections 3 and 3.3.
- Have you attached a representational drawing? Note: the drawing should comply with AS 1100 – Technical drawing or an equivalent international standard for technical drawing. The drawing should be an arrangement drawing where the item depicted is the end product and includes dimensions.
- Have you checked that the drawing number/s (including revision number/s) on the drawing/s provided are correct and match the drawing number/s stated by the designer and the design verifier?

## Section 4. Designer statement

- Has the designer completed all fields in section 4 of the form?

## Section 5. Designer declaration

- Has the designer signed and dated the declaration?

## Section 6. Design verification statement

- Has the design verifier completed all fields in section 6 of the form?
- Has the design verifier documented the process used to verify the design? Note: this document is not required to be submitted with the application but must be available if requested.
- Did more than one person participate in the design verification? If so, ensure a design verification statement has been provided by each person,

## Section 7. Declaration of design verifier

- Has the design verifier signed and dated the declaration?

If you have been able to tick all of the sections above you may proceed with your submission.

# Lodging your application

Submit your completed notification to the Engineering Unit, WHSQ. It is preferred that the applications be lodged via email.

**Email:** [designregistrationapplications@oir.qld.gov.au](mailto:designregistrationapplications@oir.qld.gov.au).

Applications can be accepted by post. Please contact the Engineering Unit on 1300 362 128 if you wish to post the application.

**Post:** Engineering Unit  
Workplace Health and Safety Queensland  
Office of Industrial Relations  
PO Box 820  
Lutwyche Qld 4030

Once the form has been completed and checked using the applicant's checklist, the application and supporting documents are to be submitted via email. If you have any queries or need assistance completing this form please email the Engineering Unit at the address above.

## Payment options

Payment of the application fee must be made when lodging the application.

Two options of payment are available:

1. Ring Workplace Health and Safety Queensland on 0478285973 to provide credit card details over the phone.
2. Cheques should be made payable to Office of Industrial Relations. Make sure that the information about the application is included by writing it on the back of the cheque or on a securely attached note:
  - the applicant's name
  - description of plant
  - the model number (if possible).

Mail cheque to:  
Engineering Unit  
Workplace Health and Safety Queensland  
Office of Industrial Relations  
PO Box 820  
Lutwyche Qld 4030

## What happens after I submit an application?

After receiving the application and payment has been received:

1. WHSQ will assess your application.
2. Each section of the application form is checked to ensure all information provided is complete. It is important that all applicants provide the correct information in the first instance as this will ensure the applications are processed without delay. The Regulation allows up to 120 days after receiving complete and correct applications to decide whether the registration is granted.
3. If any information is missing, the applicant will be contacted either by email or phone.
4. Once details are verified as complete the application will be registered.
5. A registration document will be returned to the applicant and a copy kept by WHSQ. The plant design registration number will be provided on the registration document which includes a registration confirmation section completed by an authorised officer of WHSQ. On receipt of the confirmed design registration, the applicant must provide the plant design registration number to anyone involved with the manufacture, importation or supply of the plant. Manufacturers, suppliers and importers are required to provide the plant design registration number to anyone who purchases the plant.
6. Following the registration of plant design, an owner is required to register specified items of plant before it is permitted to be used at the workplace.

## Review of decision

A decision on an application for registration of plant design under section 256 or section 258 of the Work Health and Safety Regulation 2011 is a reviewable decision. For further information on review of decisions contact the WHSQ Infoline on 1300 362 128.