

Form 20

# Application for addition or change of qualified person/ authorised parties for a contractor licence

V 1.02.2019

*Electrical Safety Act 2002*

Please complete all fields in **BLOCK LETTERS**

Only complete those sections relevant to the types of licence (restricted or unrestricted)

## Section 1 Applicant/Company details

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.

NOTE: If you are nominating more than one QTP or QBP you must provide a completed section 3 or 4 for each nominee

### Current licence details

|                            |  |
|----------------------------|--|
| Name on contractor licence |  |
| Contractor licence number  |  |

## Section 2 Authorised parties

Indicate whether you wish to add authorised parties for this licence (other than the QTP or QBP)

| Name      |  |  |  |
|-----------|--|--|--|
| Position  |  |  |  |
| Signature |  |  |  |

Indicate whether you wish to remove any authorised parties for this licence (other than the QTP or QBP)

|      |  |
|------|--|
| Name |  |
|      |  |
|      |  |

## Section 3 Removing qualified persons

Indicate whether you wish to remove any existing QTPs or QBPs from this licence

Nominate the qualified person to be removed from the licence

| Name | Licence number | QTP                      | QBP                      |
|------|----------------|--------------------------|--------------------------|
|      |                | <input type="checkbox"/> | <input type="checkbox"/> |
|      |                | <input type="checkbox"/> | <input type="checkbox"/> |
|      |                | <input type="checkbox"/> | <input type="checkbox"/> |
|      |                | <input type="checkbox"/> | <input type="checkbox"/> |

## Section 4 Adding a 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"/> |
| Are you subject to a pending or current disciplinary hearing or proceeding under the <i>Electrical Safety Act 2002</i> or corresponding law of another jurisdiction?   | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you or an electrical contractor licence holder for whom you were the nominated QTP at the relevant time, been issued with an improvement notice, electrical safety protection notice or infringement notice for which there is outstanding payment or rectification required? | <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

#### UNRESTRICTED LICENCE

You must hold a Queensland electrical mechanic licence for at least two years, or a Queensland electrical mechanic licence issued under mutual recognition of a licence held for at least two years.

|   |             |
|---|-------------|
| Queensland electrical work licence number | Expiry date |
|---|-------------|

You must also meet the following eligibility criteria

|                          |   |
|--------------------------|---|
| <input type="checkbox"/> | I have completed UEENEEG197A, UEENEEG122A and UEENEEG123A within the last three years. <ul style="list-style-type: none"><li>• Provide copies of your statements of attainment.</li></ul> |
|--------------------------|---|

#### RESTRICTED LICENCE

You must:

- hold a Queensland electrical work licence, or
- have completed UEENEEP026 (for testing and tagging only), or
- be an RPEQ registered electrical engineer

|   |  |             |
|---|--|-------------|
| <input type="checkbox"/>                  | I hold a Queensland electrical work licence  |             |
| Queensland electrical work licence number |  | Expiry date |
| <input type="checkbox"/>                  | I am applying for a restricted electrical contractor licence for testing/tagging work only. <ul style="list-style-type: none"><li>• Provide a copy of your statement of attainment for UEENEEP026.</li></ul> |             |
| <input type="checkbox"/>                  | I am a RPEQ registered electrical engineer. <ul style="list-style-type: none"><li>• Provide a copy of your RPEQ certificate of registration.</li></ul>   |             |

### 4.4 Proof of identification

|                          |  |
|--------------------------|--|
| <input type="checkbox"/> | I hold a Queensland electrical work licence. (Provide your licence number in section 4.3 above), <b>OR</b> |
| <input type="checkbox"/> | I have provided <b>certified copies</b> of proof of identity in accordance with Table 1.                   |

**The nominated QTP must sign the declaration on page 4**

## 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 action 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?<br>• Provide evidence of your discharge.   | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you ever been a QBP, 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"/> |
| Has an electrical contractor licence holder for which you were a QBP or director at the relevant time ever been disciplined by any committee, tribunal or court in relation to the performance of electrical work in Queensland or another jurisdiction?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Are you subject to pending or current disciplinary hearing or 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"/> |
| Is an electrical contractor licence holder for which you were a QBP or director at the relevant time subject to a pending or current disciplinary hearing or proceeding by any committee, tribunal or court relating to the performance of electrical work in Queensland or another jurisdiction? | <input type="checkbox"/> | <input type="checkbox"/> |

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

### 5.3 QBP eligibility

#### UNRESTRICTED LICENCE

|                          |  |
|--------------------------|--|
| <input type="checkbox"/> | <p>I have completed UEENEE101A and UEENEE175A within the last three years.<br/>and either</p> <ul style="list-style-type: none"> <li>• BSBSMB401 (within the last three years), or</li> <li>• a business qualification of diploma level or higher (e.g. Bachelor of Business), or</li> <li>• have provided evidence of having operated a business for five years</li> </ul> <p>Provide copy of your statements of attainment/qualifications/evidence of business experience.</p> |
|--------------------------|--|

#### RESTRICTED LICENCE

|                          |  |
|--------------------------|--|
| <input type="checkbox"/> | <ul style="list-style-type: none"> <li>• I have completed BSBSMB401 or UEENEE175A within the last three years, or</li> <li>• I hold a business qualification of diploma level or higher (e.g. Bachelor of business), or</li> <li>• I have operated a business for five years.</li> </ul> <p>Provide copies of your statement of attainment/qualifications/evidence of business experience.</p> |
|--------------------------|--|

### 5.4 QBP proof of identification

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

**The nominated QBP must sign the declaration on page 4**

## Section 6 Declaration by QTP

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.
- the information provided by me for this application is true and correct to the best of my knowledge.
- I agree to be the nominated QTP for the applicant.

I am aware that I should inform the Electrical Safety Office if I cease to be, or no longer wish to be the QTP for this licence.

|           |      |
|-----------|------|
| Signature | Date |
|-----------|------|

## Section 7 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.
- the information provided by me for this application is true and correct to the best of my knowledge.
- I agree to be the nominated qualified business person for the applicant.

I am aware that I should inform the Electrical Safety Office if I cease to be, or no longer wish to be the QBP for this licence.

|           |      |
|-----------|------|
| Signature | Date |
|-----------|------|

## Section 8 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 |
|-----------|------|

## Lodging your application

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

Email the completed form to [LPS@oir.qld.gov.au](mailto:LPS@oir.qld.gov.au)

### 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 Identity documents

You need to provide **certified or witnessed copies** of two matching identity documents from the list below. The two documents can be:

- two category A documents

OR

- one category A document and one category B document.

**At least one document must be photographic and show a full name and date of birth.**

### Certified copies

A certified copy is a copy of an original document that has been verified to be a true copy by either a Justice of the Peace or a Commissioner for Declarations. For more information visit [www.qld.gov.au/law/legal-mediation-and-justice-of-the-peace/about-justice-of-the-peace](http://www.qld.gov.au/law/legal-mediation-and-justice-of-the-peace/about-justice-of-the-peace)

### Witnessed copies

Copies of identity documents can also be witnessed by the following parties. The witnessing party will need to:

1. write on the copy “This is a true copy of the original document sighted by me on DD/MM/YY”.
2. sign and print their name
3. provide a contact telephone number, and
4. state their profession/occupation

### Approved witnessing parties

- Legal Practitioners, JPs or C-Decs
- Medical professionals (Doctor, Dentist, Nurse, Pharmacist, Physiotherapist, etc)
- Primary, secondary and tertiary teaching professionals
- Serving public servants (Local, State and Commonwealth)
- Chartered Accountants
- RPEQ engineers
- Post Office staff
- Financial institution staff (banks, building societies/credit unions)

| <b>Approved identity documents</b>   |
|--|
| Documents or identity cards that carry an expiry date must be current  |
| <b>Category A documents</b> <ul style="list-style-type: none"><li>• Australian or New Zealand driver licence</li><li>• Australian Passport</li><li>• Foreign Passport</li><li>• Australian Birth Certificate - (full or extract)</li></ul>   |
| <b>Category B documents</b> <ul style="list-style-type: none"><li>• Medicare card</li><li>• Queensland High Risk Work licence</li><li>• QBCC occupational licence</li><li>• Australian Firearm Licence</li><li>• Student ID Card</li><li>• Australian Defence Force photo identity card (excluding civilians)</li><li>• Australian Citizenship Certificate/Naturalisation Certificate</li><li>• Certificate of Evidence of Resident Status</li></ul> |