

Form 16

# Application for an electrical work licence

## (mutual recognition)

V 1.12.2020

Electrical Safety Act 2002

Use this form if you are applying for a Queensland electrical work licence, including a restricted electrical work licence, under the *Mutual Recognition Act 1992* or *Trans-Tasman Mutual Recognition Act 2003*.

The class of licence issued will be determined by the scope of work permitted under your original licence.

**Please complete all fields in BLOCK LETTERS**

### Section 1 Applicant 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	Mobile
Email	

### Residential 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 residential 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 2 Proof of identification

I have provided copies of identity documents in accordance with Table 1

### Section 3 Interstate/New Zealand licence

Provide details of your current licence

Licence number	Licence category	Expiry date
Place of issue		

Is your licence subject to any conditions or restrictions that do not appear on the licence?  YES  NO

If YES please provide the following details

Have you been subject to any disciplinary proceedings (including any preliminary investigations or action that might lead to disciplinary proceedings) in relation to your licence?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If Yes please provide the following details		

## Section 4 Declaration

I declare that:		
<ul style="list-style-type: none"> <li>the information contained in this application is, to the best of my knowledge, true and correct.</li> <li>I am registered or have a current electrical licence in the jurisdiction stated in this application.</li> <li>I am applying for recognition of that licence in accordance with the mutual recognition principle under the <i>Mutual Recognition (Queensland) Act 1992</i> or the <i>Trans-Tasman Mutual Recognition (Queensland) Act 2003</i>.</li> <li>I am not subject to any disciplinary proceedings other than as declared in Section 3.</li> <li>My licence is not cancelled or suspended as a result of disciplinary action.</li> <li>I am not otherwise personally prohibited from carrying on any such occupation, and am not subject to any special conditions in carrying on that occupation, as a result of criminal, civil or disciplinary proceedings in New Zealand or any other State or Territory.</li> <li>I am not subject to any special conditions in the carrying out of my occupation other than as declared in Section 3</li> <li>I give consent to the Electrical Safety Office to make inquiries of, and exchange information with, the authorities of New Zealand or any other State or Territory regarding my activities in the occupation or otherwise regarding matters relevant to this application.</li> <li>I have provided certified copies of the original instrument that evidences my existing registration.</li> </ul>		
Signature		Date

## Section 5 Fees

Your application will not be processed until the prescribed fee has been paid. Please refer to the “Table of fees” at [WorkSafe.qld.gov.au](http://WorkSafe.qld.gov.au).

Please indicate your preferred method of payment below.

Your receipt will be sent to the email address provided. If you wish for your receipt to be sent to a different address, please 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 [WorkSafe.qld.gov.au](http://WorkSafe.qld.gov.au). For further information phone: 1300 362 128.

<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 date of birth as per this application. If you are not provided this information do not proceed with the transaction.**

## Lodging your application

The preferred method of application is by email to [LPS@oir.qld.gov.au](mailto: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

### 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

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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>