

Application for Transfer of an Employment Agent's Licence (on behalf of a Body Corporate or Partnership)

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[Click here to download Acrobat Reader.](#) Alternatively the form can be printed and
completed by hand, scanned and submitted (with all attached documents).

Application Checklist

- Australian police check** – the person nominated as the licence holder for the new body corporate/partnership must provide an Australian police check in their full legal name which is less than three (3) months old. Information about our [current police check requirements](#) can be found on our website.
- Two (2) character references** – you must provide references from the two (2) people nominated within the application form, ensuring they are completed using the pro forma titled [Employment Agent Character Reference Template](#) which is available to download from our website.
- Resume** – you must provide a copy of your resume which details any experience you have had in the employment agent industry and/or experience in the human resources or business management industry (include names of employers, types of experience and relevant dates).
- Scale of fees (not mandatory)** – if you utilise a scale of fees which has not yet been approved by the Commissioner for Consumer Protection, you must submit a copy as part of this application. Use the information on our [website](#) under the heading 'Scale of Fees' to ensure yours meets the requirements of section 38 of the Act.
- Prescribed fee** – payment of the fee must be made at the time of lodgement.

Application fee

Please refer to our website for the [current prescribed fees](#).

The is non-refundable, exempt from GST and subject to change without notice. Part payment cannot be accepted. Cheques should be made payable to the Commissioner for Consumer Protection.

Enquiries

Licensing Advice Line: 1300 304 064
Licensing Email: cplicensing@lgirs.wa.gov.au
Overseas Callers: +61 8 6251 2969

Lodgement options

In person

Customer Service
Level 1, Mason Bird Building
303 Sevenoaks Street CANNINGTON
Hours: 8:30am to 4:30pm, Monday to Friday

By post

Licensing Services
Department of Local Government, Industry
Regulation and Safety
Locked Bag 14
CLOISTERS SQUARE WA 6850

General Enquiries: 1300 304 054
Web Site: www.wa.gov.au/organisation/service-delivery/consumer-protection-licensing-and-registration

Transfer Application: Employment Agent's Licence (on behalf of a Body Corporate or Partnership)

Credit card payment details

Card Type Visa Mastercard (only Mastercard and Visa accepted)

Card Number

Cardholder Name Expiry Date

Cardholder Signature: Date Contact Number

I authorise the Department to deduct the current prescribed fee*

Office use only			
Licence No	Total fee	Department code	Chart Description
	\$	EA	Transfer

1. Licence information

Licence number:

The (name of body corporate/partnership):

trading as (business name/s):

of (trading address:):

Business email address:

Business contact number: (mobile number preferred)

being the holder of a licence under the Act hereby apply/applies for the transfer of the licence because of the following circumstances:

2. Proposed new licence holder details

The licence is to be transferred to:

Full name:

of (residential address):

Email address:

Contact number: (mobile number preferred)

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3. Business is to be carried on at the following addresses

Principal place of business

Street address:

Suburb:

State:

Postcode:

Other place of business (if applicable)

Street address:

Suburb:

State:

Postcode:

4. Character referees

State the names and contact details of two (2) persons resident in Western Australia willing to act as referees for the proposed licence holder:

(a) Referee 1

Salutation: Mr Mrs Ms Other, please specify

Full legal name:

Street address:

Suburb:

State:

Postcode

Phone number:

Email address:

(b) Referee 2

Salutation: Mr Mrs Ms Other, please specify

Full legal name:

Street address:

Suburb:

State:

Postcode

Phone number:

Email address:

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5. Existing licence/s

Does a person, body corporate (company) or firm mentioned in this application hold a licence under the Act? Yes No

If so, give particulars of the licence:

6. Declaration:

I certify that the body corporate (company) or partnership has consented to this application.

Signature of nominated licence holder: Date:

Name of body corporate (company) or partnership:

Name and signature of person(s) authorised by the body corporate (company) or partnership to approve of and consent to this application:

Name:		Signature:	
Name:		Signature:	
Name:		Signature:	
Name:		Signature:	