



Renewal Application Employment Agent's Licence

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This form is designed to be used with the FREE Adobe Acrobat Reader application. [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 individual licensee or person nominated as the licence holder must provide an Australian police check in their full legal name which is less than three (3) months old. Information about [current police check requirements](#) can be found on our website.
- 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, including any applicable late fee, must be made at the time of lodgement.

Application fee

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

Applications received within three (3) months of the expiry date will be accepted but will incur a late fee.

The fee is 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.

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

Enquiries

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

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

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		Department Code	EA	Chart Description	Renewal
Total Fee	\$	Link to Licence	YES	Chart Key	<input type="checkbox"/> I <input type="checkbox"/> C <input type="checkbox"/> P

Renewal Application: Employment Agent's Licence

Licence information

Licence number:	<input type="text" value="EA"/>
Full name of individual licensee OR nominated licence holder:	<input type="text"/>
Company/Partnership name (if applicable):	<input type="text"/>
Business/Trading name/s:	<input type="text"/>
Registered address:	<input type="text"/>
Business email address:	<input type="text"/>
Business contact number: (mobile number preferred)	<input type="text"/>

1. Declaration

I (full name)
of (residential address)
phone no. being the holder of an Employment Agent's Licence on (either):

my own behalf

trading as:

OR

on behalf of

name of company/partnership:

trading as:

apply for renewal of the licence.

2. The business is proposed to be carried on at the following addresses

Main address	<input type="text"/>
Additional address/es (if applicable)	<input type="text"/>

Signature of individual licensee
OR nominated licence holder:

Date: