



Application Form Asbestos Removal Licence: Class B

Work Health and Safety Act 2020 (the Act)
Work Health and Safety (General) Regulations 2022 (the Regulations)

How to complete this application

- 1. Read the application form in full to understand all of the information required
- 2. Complete the application form in full
- 3. Gather all required attachments, such as certificates of attainment
- 4. Use the provided checklist to check the application is complete
- 5. Submit the application along with payment of the required fee

For assistance completing this application:

Phone: 1300 424 091

Email: Worksafelicensing@lgirs.wa.gov.au

How to submit this application

Submission	Application fee					
Online	Submit your application and pay online: https://onlineforms.dmirs.wa.gov.au/#/form/63f85d6a895bd81608a35e8f/app/68a6ae1d2facde05e8844be2	Pay by credit card online				
Post	Licensing Services Department of Local Government, Industry Regulation and Safety Locked Bag 14 Cloisters Square PERTH WA 6850	Attach Application Payment Form				
In Person	Department of Local Government, Industry Regulation and Safety Level 1, Mason Bird Building 303 Sevenoaks Street, Cannington Office opening hours: 8.30am - 4.30pm, Monday to Friday	www.wa.gov.au/medi a/49956/download?inl ine				

*Fees are reviewed annually and are subject to change without notice. Current application fees can be found on the WorkSafe website

OFFICE USE ONLY							
Total Fee	\$	Department Code	WR	Chart Description	☐ Asbestos class B – New application		





PART 1: APPLICANT DETAILS

Application type							
Body Corporate			☐ Individual				
	Applicant Details						
		Body Corporat	e details <i>if app</i>	licable			
Registered Compar	ny name						
ACN (Australian Comp.	ACN (Australian Company Number)						
		Individual D	etails <i>if applica</i>	able			
Family name							
Given name							
Date of birth				Place of birth			
Proof of ident	Proof of identity document/s attached. Refer to proof of identity requirements at the end of form for details						
		Conta	act Details				
Business Name (if a	pplicable)						
Business nam	ne extract atta	ached (if applicable)					
Registered or Residual	lential	Street address					
		Suburb			Postcode		
Postal address (if different to registered	or residential	Postal address					
address)		Suburb			Postcode		
Mobile phone no.		1	Phone no. (d	lay)			
Email address							
Interstate application justification							
Body corporates or individuals who are located or reside outside of WA are required to provide details to justify the grant of the licence. Attach a document detailing the why you require a licence in WA if you are applying from outside WA.							
Statement justifying application attached (if applicable)							





PART 2: CONDITIONAL RESTRICTIONS

To assist businesses which do not remove asbestos a primary part of their service, or which only provide a specific type of asbestos removal, a conditionally restricted Class B asbestos removal licence can be applied for. Choose one of the options below to apply for a category of restricted Class B licence or a full unrestricted Class B licence. Select ONE of the Following Removal of Bonded Asbestos Fencing. Activities authorised by the Licence will be restricted to removal of bonded asbestos fencing only. The experience examples provided for your nominated supervisor/s can be limited to fencing. OR ☐ Removal of Bonded Asbestos Roofing. Activities authorised by the Licence will be restricted to removal of bonded asbestos roofing only. The experience examples provided for your nominated supervisor/s can be limited to roofing. OR Removal of Bonded Telecommunication Pits. Activities authorised by the Licence will be restricted to removal of bonded asbestos telecommunication pits only. The experience examples provided for your nominated supervisor/s can be limited to telecommunication pits. OR The licence authorises removal of all types of non-friable asbestos. The experience

examples provided for your nominated supervisor/s must demonstrate removal of a minimum of three different types of asbestos removal. Refer to the Statement of Experience Instructions below for more specific details of experience requirements.



PART 3: SAFE WORK

Specialist Equipment Questions

A Class B asbestos removal licence holder must ensure the availability and use of specialist safety equipment.

To demonstrate how you will ensure access you are required to provide evidence that you have access to the following safety and minor equipment and consumables.

Safety equipment						
Equipment item	Describe how you will ensure access to this equipment: Owned or leased? If leased from who? Make and model if known					
High Efficiency Particulate Absorbing filter H Class Vacuum – Dispersed Oil Particulate (DOP) tested						

willor equipment and consumables					
Question: Provide details of the typical minor equipment and consumables you will make available for Class B asbestos removal work.					
Answer:					



PART 4: NOMINATED SUPERVISORS

Supervisor Nomination
An asbestos removal licence holder must ensure that asbestos removal work is supervised by an approved nominated supervisor, who is at least 18 years of age. At least one competent person (nominated supervisor) must be nominated as part of this application. If you are applying as an individual you can nominate yourself and or another person/s.
Attach to this application a completed 'Supervisor Nomination Form' for each nominated
supervisor. A copy of the 'Supervisor Nomination Form is provided at the end of this form.
Supervisor Availability
If you expect to be undertaking more than one asbestos removal job at the same time you will be required to have an approved nominated supervisor available for each job.
To demonstrate how you will ensure that all asbestos removal work you undertake can be appropriately supervised you are required to Answer the following questions detailing how you will ensure appropriate supervision of all asbestos removal work.
Question: How will you ensure that a nominated supervisor is available for all asbestos removal work including where you are completing more than 1 asbestos removal job at the same time.
Answer:
Question: How will you ensure that a nominated supervisor is available for all asbestos removal work including
where a nominated supervisor becomes unavailable for any reason, such as illness.
Answer:

07/2025





PART 5: PROBITY AND DECLARATION

Pı	robity questions					
	For help understanding these questions visit: https://www.wa.gov.au/media/50716/download?inline or call 1300 424 091.					
1.	Do you have a current asbestos removal licence in another State/Territory in Australia?					
	Yes: □ No: □					
2.	Have you, the body corporate or any of the officers of the body corporate, ever been convicted or found guilty of an offence under Work Health and Safety legislation in Australia?					
	Yes: □ No: □					
3.	Have you, the body corporate or any of the officers of the body corporate, ever been convicted or found guilty of any offence in relation to the unlawful disposal of hazardous waste under the <i>Environmental Protection Act 1986</i> ?					
	Yes: □ No: □					
4.	Have you, the body corporate or any of the officers of the body corporate, ever entered into an enforceable undertaking under Work Health and Safety legislation in Australia?					
	Yes: □ No: □					
5.	Have you, the body corporate or any of the officers of the body corporate, ever been refused an asbestos removal licence in Australia?					
	Yes: □ No: □ N/A: □					
6.	Have you, the body corporate or any of the officers of the body corporate, previously held an asbestos removal licence in Australia which had conditions imposed on it, or which was suspended or cancelled?					
	Yes: □ No: □					
7.	Have you, the body corporate or any of the officers of the body corporate, ever been disqualified from applying for an asbestos removal licence in Australia?					
	Yes: □ No: □					
If you answered 'yes' to any of the above questions, attach details. A 'yes' response will be considered by the WorkSafe Commissioner on the facts presented, and may not affect your application to be licensed.						
	N/A: □ Attached: □					





Declaration

Section 268 of the *Work Health and Safety Act 2020* provides for penalties of up to \$12 500 for a person who gives information that the person knows to be false or misleading in a material particular or omits any matter or thing without which the information is misleading; or who provides a document that the person knows to be false or misleading in a material particular. By signing this application form you declare that the information and documents you have provided in support of this application are true and correct. In addition, by signing this form, you give consent to the WorkSafe Commissioner, or persons so directed, to obtain on your behalf any document, record, file, or information that may be necessary and relevant to consider this application.

Declaration of an individual applicant						
Full Name:						
Signature:			Date:			
Declaration o	f a B	ody Corporate applicant				
Please refer to Sec	tion 12	27 CA of the <i>Corporations Act 2001</i> if s	igning as	s a Body Co	rporate applicant	
Position:						
Full Name:						
Signature:			Date:			
Declaration of the nominated supervisor						
Full Name:						
Signature:			Date:			





Application checklist								
✓	Please ensure you have provided/completed each of the following:	Office use only						
PAYM	PAYMENT							
	Application Payment form completed and attached							
PART	1: APPLICANT DETAILS							
	Part 1: Applicant Details competed in full							
	Business name extract provided (if applicable)							
	Passport quality photograph of applicant provided (individual applicants only)attached							
	Interstate application justification attached (if applicable)							
	Proof of identification attached for individual applicant							
PART	2: NOMINATED SUPERVISOR							
	Part 2: Nominated Supervisor Questions completed in full							
	One (1) completed 'Supervisor Nomination Form' attached for each nominated supervisor including: • Proof of identification • Statement of Attainment for VET course CPCCDE4008 • Statement of Attainment for VET course CPCCDE3014 • Statement of Experience (SOE)							
	Evidence of prior approval as a nominated supervisor (if applicable)							
PART	PART 3: PROBITY AND DECLARATION							
	All probity questions answered							
	Declaration signed							





Proof of Identity Requirements

To establish proof of identity provide **ONE** primary document or at least **THREE** secondary documents from the documents listed below. At least one of those documents must evidence the age of the nominated supervisor (at least 18 years).

For more examples please refer to the Applicant Guide – Application for an Asbestos Removal Licence

Primary Identification	Secondary Identification
Australian Passport – Current or expired within the last two years, but not cancelled	Birth certificate or certified extract
A current driver's licence, learners permit or any other photographic identity document issued under Australian Law	Australian Citizenship or naturalisation document
International Passport or other documents with same characteristics of Passport Current, not expired or cancelled	Current entitlement card issued by a State or Commonwealth Government department (for example, a Medicare, Pension, Health or Veteran)
Current International Driver's Licence or an overseas driver's licence recognised by the WA Department of Transport (in English or translated in English)	Utility bill (for example Telephone, gas or electricity account) not more than 12 months old
Police and Defence identification cards	Water, local rate notice or land valuation notice not more than 12 months old
State or Commonwealth employee photo identification card with DOB	Electoral enrolment card or other evidence of enrolment not more than two years old
Western Australian Photo Card (formerly Proof of Age)	Student Identification Card (Secondary/Tertiary)





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Supervisor Nomination Form

How to complete this form

- 1. Print and complete a separate supervisor nomination form for each person nominated
- 2. Complete the details of the person nominated
- 3. Complete a statement of experience for each asbestos removal job used to demonstrate the suitability of the person nominated. Provide as much detail as possible. Print or add extra pages if required.
- 4. Ensure that each page of the statement of experience is signed by the employer/authorised referee.
- 5. Attach proof of identity for the person nominated

6. Attach copies of certification							
Details of person nominated							
Family Name							
Given Name/s							
Date of Birth				Place of birth			
Residential Addre	ess		Street				
			Suburb			Postcode	
Mobile phone no.				Phone no. (day)			
Email address							
Certification							
Statements of Att attached.	tainme	nt for there foll	owing courses is	sued by a Registere	d Training (Organisation	(RTO) are
CPCCDE4	008 - 8	Supervise asbe	estos removal co	urse			
CPCCDE3	014 - F	Remove non-fr	iable asbestos				
Already approved as nominated supervisor							
If the person nominated as supervisor has been previously approved as a nominated survivor, within the last 3 years:							
 by another state or territory licensing authority, or for another Class B ashestos removal licence holder in WA 							

Application Class B Asbestos Removal New

experience.

evidence of this approval can be submitted and may be considered as an alternative to a detailed statement of





Statement of Experience Instructions

Each nominated supervisor for Class B asbestos removal licence applications must be able to demonstrate at least one (1) year of relevant industry experience. To evidence the required level of experience each supervisor nomination should include:

- details of at least six (6) different asbestos removal works which:
 - o occurred within the last three (3) years,
 - o include at least three (3) different types of asbestos removal,
 - o include details of a referees for reference checking of the work
- Examples of non-friable asbestos removal works which occurred prior to 5 April 2022 should include sufficient documentary evidence of the nominated supervisor's completion of the work such as:
 - o the asbestos removal control plan used,
 - Safe Work Method Statements,
 - o tip receipts.

Work which occurred on or after 5 April 2022 will be validated using the asbestos removal notification records submitted by the licence holder.

To assist applicants a statement of experience (SOE) template is provided below.

IMPORTANT:

- Examples of work will not be accepted as evidence of the nominated supervisors experience where:
 - o a licence was required but the removalist was not licensed,
 - the asbestos removal was carried out on after the 1 January 2023 and was not notified to the Department using the online form, prior to the work commencing.
 - o the licence holder did not have an approved nominated supervisor at the time of the removal.
- Each example provided will be validated by contacting referees to confirm the role of the applicant in the work.
- Additional detail or additional examples of experience may be requested. Providing as much evidence of experience as possible will assist the application.
- Examples of a types of non-friable asbestos removal may include but are not limited to the following examples: fencing, roofing, eaves, guttering, cladding, walls, ceiling piping and vinyl floor tiles that can be removed intact.

A credible and independent referee is not:

- a relative;
- under potential conflict (your employee);
- a co-worker or subordinate worker; or
- an office manager or HR manager.

NOTE: If the person nominated is an existing approved nominated supervisor who has been conducting work under an existing Class A or Class B asbestos removal licence (regardless of jurisdiction) examples of experience are not required to be provided and the nominated supervisor may be approved subject to confirmation of an appropriate compliance history. If the person is an existing approved nominated supervisor, please attached details of this approval.

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Statement of Experience							
Example 1 of 6							
Project Start Date		Project End Date					
Address/location	· · · · · · · · · · · · · · · · · · ·						
Type of Asbestos removed		Quantity of asbestos removed					
Type of Structure		Height of	structure/building				
Asbestos Removal Lice	nce Number						
	;	Supportii	ng Details				
For work conducted safe work method states			experience, such a	s asbestos removal control plans;			
				n a business letterhead document nd role in completing the work.			
Example 2 of 6							
Project Start Date		Project Er	nd Date				
Address/location							
Type of Asbestos removed	Quantity of asbestos removed						
Type of Structure	Height of structure/building						
Asbestos Removal Licence Number							
Supporting Details							
For work conducted prior to 2023 attach evidence of experience, such as asbestos removal control plans; safe work method statements and disposal receipts.							
Reference letter from an employer or organisations, dated and signed on a business letterhead document including: asbestos removal licence number, details of your responsibilities and role in completing the work.							





Statement of Experience								
Example 3 of 6								
Project Start Date		Project E	nd Date					
Address/location								
Type of Asbestos removed		Quantity of asbestos removed						
Type of Structure		Height of	structure/building					
Asbestos Removal Licence Number								
Supporting Details								
For work conducted prior to 2023 attach evidence of experience, such as asbestos removal control plans; safe work method statements and disposal receipts.								
Reference letter from an employer or organisations, dated and signed on a business letterhead document including: asbestos removal licence number, details of your responsibilities and role in completing the work.								
Example 4 of 6								
Project Start Date		Project End Date						
Address/location								
Type of Asbestos removed		Quantity of asbestos removed						
Type of Structure		Height of structure/building						
Asbestos Removal Licence Number								
Supporting Details								
For work conducted prior to 2023 attach evidence of experience, such as asbestos removal control plans; safe work method statements and disposal receipts.								
Reference letter from an employer or organisations, dated and signed on a business letterhead document including: asbestos removal licence number, details of your responsibilities and role in completing the work.								





Statement of Experience								
Example 5 of 6								
Project Start Date		Project End Date						
Address/location								
Type of Asbestos removed		Quantity of asbestos removed						
Type of Structure		Height of structure/building						
Asbestos Removal Licence Number								
Supporting Details								
For work conducted prior to 2023 attach evidence of experience, such as asbestos removal control plans; safe work method statements and disposal receipts.								
Reference letter from an employer or organisations, dated and signed on a business letterhead document including: asbestos removal licence number, details of your responsibilities and role in completing the work.								
Example 6 of 6								
Project Start Date		Project End Date						
Address/location								
Type of Asbestos removed		Quantity of asbestos removed						
Type of Structure		Height of structure/building						
Asbestos Removal Licence Number								
Supporting Details								
For work conducted prior to 2023 attach evidence of experience, such as asbestos removal control plans; safe work method statements and disposal receipts.								
Reference letter from an employer or organisations, dated and signed on a business letterhead document including: asbestos removal licence number, details of your responsibilities and role in completing the work.								





	Statement of Experience							
Declaration by Nominated Supervisor Applicant								
Ι,			(print nam	e) hereby declare:				
	 the information supplied in this application is true and correct to the best of my knowledge 							
	 I consent to WorkSafe making enquiries and validating my qualifications with the educational provider who issued my qualification certificates. 							
	I consent to WorkSafe contacting my referees to verify my evidence of experience							
Signature of nominated supervisor applicant			Date Signed					

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