

# Application for renewal 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 Applicant Guide: <https://www.wa.gov.au/media/50716/download?inline>
2. Read the application form in full to understand all of the information required
3. Gather all required attachments
4. Ensure the application is complete before submitting
5. Submit the application along with payment of the required fee

For assistance completing this application:

Phone: 1300 424 091

Email: [worksaferegistration@lgirs.wa.gov.au](mailto:worksaferegistration@lgirs.wa.gov.au)

## Important Information

- You must apply to renew **before** the expiry of the licence.
- Your asbestos removal licence will remain in force while your application is being considered and until you are given notice of a decision to grant or refuse the application, or until the application is taken to be withdrawn. You can continue to undertake asbestos removal work during this period.
- WorkSafe will assess your application for renewal using the information you provide as well as information available in licence databases, record systems and through other sources as required.
- Your licence will not be renewed if you have not completed work in the period since the licence was granted or last renewed. Licensing Officers will confirm this by checking asbestos removal work notification records.
- When determining your application Licensing Officers will consider WorkSafe records in regards to investigations, penalties and improvement notices issued since the licence was granted or last renewed.
- The application for renewal will be refused if false or misleading information is identified in the application. 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.

## How to submit this application

Submission method		Application fee
Post	Licensing Services Department of Local Government, Industry Regulation and Safety Locked Bag 14 Cloisters Square PERTH WA 6850	Attach Application Payment Form  <a href="https://www.wa.gov.au/media/49956/download?inline">www.wa.gov.au/media/49956/download?inline</a>
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	

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

### OFFICE USE ONLY

<b>Total Fee</b>	\$	Department Code	WR	Chart Description	<input type="checkbox"/> Asbestos class B – Renewal application
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## PART 1: LICENCE HOLDER DETAILS

Licence holder details			
Licence holder name			
Registered business (trading) name - <i>if applicable</i>			
Licence Number		Expiry date	
Contact Details			
Principal place of business or Residential address	Street address		
	Suburb		Postcode
Postal address <i>(if different to registered or residential address)</i>	Postal address		
	Suburb		Postcode
<i>All communications relating to this application and licence (if granted) will be sent to the below email address</i>			
Mobile phone no.		Phone no. (other)	
Email address			

## PART 2: CONDITIONAL RESTRICTIONS

<p>To assist applicants who do not remove asbestos as a primary part of their service, or who only provide a specific type of asbestos removal, a conditionally restricted Class B asbestos removal licence can be applied for.</p> <p style="text-align: center;"><b>Select <u>ONE</u> of the Following</b></p> <p><input type="checkbox"/> <b>Full Class B</b> - authorises removal of all types of non-friable asbestos.</p> <p><input type="checkbox"/> <b>Removal of bonded asbestos fencing only</b> – removal authorised by the licence will be restricted to bonded asbestos fencing only.</p> <p><input type="checkbox"/> <b>Removal of bonded asbestos roofing only</b> – removal authorised by the licence will be restricted to bonded asbestos roofing only.</p> <p><input type="checkbox"/> <b>Removal of bonded telecommunication pits only</b> – removal authorised by the licence will be restricted to bonded asbestos telecommunication pits only.</p>
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## PART 3: PROBITY

Probity questions must be answered		
For help understanding these questions call 1300 424 091.		
1. Do you have a current asbestos removal licence in another State/Territory in Australia?	<input type="checkbox"/> YES	<input type="checkbox"/> 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?	<input type="checkbox"/> YES	<input type="checkbox"/> 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> ?	<input type="checkbox"/> YES	<input type="checkbox"/> 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?	<input type="checkbox"/> YES	<input type="checkbox"/> 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?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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?	<input type="checkbox"/> YES	<input type="checkbox"/> 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?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If you answered 'yes' to any of the above questions, <b>attach details</b> . A 'yes' response will be considered by the WorkSafe Commissioner on the facts presented, and may not affect your application to be licensed.		<input type="checkbox"/> Attached

## PART 4: NOMINATED SUPERVISOR

You must select one	
<input type="checkbox"/>	<p><b>The nominated supervisor(s) details are unchanged –</b> <i>complete the Statement of Experience within this application form, for each existing supervisor.</i></p> <p>Each supervisor must provide details of six (6) asbestos removal jobs supervised during the term of the licence. Clearance certificates relevant to the jobs must be provided.</p> <p>Each supervisor must provide evidence of completion of the VET courses, or their equivalents: CPCDCDE3014 - Remove non-friable asbestos &amp; CPCDCDE4008 - Supervise asbestos removal course</p>
<input type="checkbox"/>	<p><b>I am nominating a new supervisor –</b> <i>attach a completed "Change of Nominated Supervisor on a Class B Asbestos Removal Licence" application form, for each new supervisor</i> <a href="https://www.wa.gov.au/media/50288/download?inline">https://www.wa.gov.au/media/50288/download?inline</a></p>

<b>Statement of Experience</b>			
Name of nominated supervisor			
<b>Job 1 of 6</b>			
Project Start Date		Project End Date	
Removal address/location			
Quantity of asbestos removed (must be in m2)		Type of asbestos removed	
Notification number			
<input type="checkbox"/>	Clearance certificate relevant to this job, attached		
<b>Job 2 of 6</b>			
Project Start Date		Project End Date	
Removal address/location			
Quantity of asbestos removed (must be in m2)		Type of asbestos removed	
Notification number			
<input type="checkbox"/>	Clearance certificate relevant to this job, attached		
<b>Job 3 of 6</b>			
Project Start Date		Project End Date	
Removal address/location			
Quantity of asbestos removed (must be in m2)		Type of asbestos removed	
Notification number			
<input type="checkbox"/>	Clearance certificate relevant to this job, attached		
<p>I declare, as the asbestos supervisor nominated, the experience detailed above is true and correct. I declare, as the asbestos supervisor nominated, that I have maintained competency to supervise asbestos removal.</p>			
Supervisor signature:			

## Statement of Experience

Name of nominated supervisor

### Job 4 of 6

Project Start Date

Project End Date

Removal  
address/location

Quantity of asbestos  
removed (must be in m2)

Type of asbestos  
removed

Notification number

Clearance certificate relevant to this job, attached

### Job 5 of 6

Project Start Date

Project End Date

Removal  
address/location

Quantity of asbestos  
removed (must be in m2)

Type of asbestos  
removed

Notification number

Clearance certificate relevant to this job, attached

### Job 6 of 6

Project Start Date

Project End Date

Removal  
address/location

Quantity of asbestos  
removed (must be in m2)

Type of asbestos  
removed

Notification number

Clearance certificate relevant to this job, attached

I declare, as the asbestos supervisor nominated, the experience detailed above is true and correct.  
I declare, as the asbestos supervisor nominated, that I have maintained competency to supervise asbestos removal.

Supervisor signature:

## PART 5: DECLARATION

### Licence holder 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 I declare that:

- The nominated supervisor/s have maintained competency;
- I have read the application form in full and have completed all parts of the form accurately;
- the information and documents I have provided in support of this application are true and correct;
- I give consent to the WorkSafe Commissioner, or persons so directed, to obtain on my behalf any document, record, file, or information that may be necessary and relevant to consider this application;
- I understand that if the application is incomplete or contains errors I will be contacted by email and provided 28 days to provide the required information and if I do not respond with the required information my application will be taken to be withdrawn and I will be required to apply for a new licence.

This declaration is considered to be made on the date the application is submitted.

Full name:

Signature:

Full Name:

Signature:

Body Corporate licence holders, note: as per Section 127 of the *Corporations Act 2001*, this declaration must be signed by

- Two company Directors, or
- A company Director and Company Secretary, or
- The sole director where that person is also the company secretary or there is no company secretary.

# APPLICATION CHECKLIST

<p>The checklist confirms the minimum amount of information required to make a decision on your application.</p> <p>If an application does not contain sufficient information to enable us to make a decision whether or not to grant the licence, we may ask the applicant to provide additional information. If an applicant does not provide the additional information by the date specified in our request, the application is taken to have been withdrawn.</p>	
<p><b>Indicate that you have provided/completed each of the following:</b></p>	<p><b>YES</b> ✓</p>
<p><b>PART 1: LICENCE HOLDER DETAILS</b></p>	
<p>I have confirmed the registered licence holder name, address, email address and mobile number.</p>	<p><input type="checkbox"/></p>
<p>I am submitting this application before the expiry of my licence.</p>	<p><input type="checkbox"/></p>
<p><b>PART 2: CONDITIONAL RESTRICTIONS</b></p>	
<p>I have confirmed the category of licence I am applying for.</p>	<p><input type="checkbox"/></p>
<p><b>PART 3: PROBITY</b></p>	
<p>I have answered all questions honestly.</p>	<p><input type="checkbox"/></p>
<p><b>PART 4: NOMINATED SUPERVISOR</b></p>	
<p>I have completed the Statement of Experience (SOE) for each existing supervisor; OR</p>	<p><input type="checkbox"/></p>
<p>I have attached a completed Supervisor Nomination Form for each new supervisor.</p>	<p><input type="checkbox"/></p>
<p><b>PART 5: DECLARATION</b></p>	
<p>I have read, understood and signed the declaration</p>	<p><input type="checkbox"/></p>
<p><b>ATTACHMENTS</b></p>	
<p>If you answered 'yes' to any of the probity questions, attach details.</p>	<p><input type="checkbox"/></p>
<p>A Statement of Attainment for the VET courses, for each existing nominated supervisor.</p>	<p><input type="checkbox"/></p>
<p>The clearance certificate relevant to each job on the SOE</p>	<p><input type="checkbox"/></p>