



APPLICATION FOR GAS WORK AUTHORISATION (INDUSTRIAL APPLIANCES)

Petroleum and Gas (Production and Safety) Act and Regulation 2004

APPLICANT DETAILS

Corporation Details *Do NOT complete if you are an Individual (Sole Trader)*

| | |
|---|------|
| Corporation Name: (in full as per ACN): | ACN: |
| Responsible Person's Full Name: | |
| Position Title: (eg CEO, Owner etc) | |

Sole Trader Details *Complete only if you are an Individual (Sole Trader)*

| | | |
|------------------------------|-------------|--------------|
| Surname: | First Name: | Middle Name: |
| Trading Name (if applicable) | | |

Contact Information

| | | | | |
|-------------------|---------------|--------|-----------|--|
| Business Phone: | Mobile Phone: | Email: | | |
| Business Address: | Suburb: | State: | Postcode: | |
| Postal Address: | Suburb: | State: | Postcode: | |

REQUESTED SCOPE

| | | |
|---|---|---|
| <input type="checkbox"/> First application (3 years) | <input type="checkbox"/> Reapplication | <input type="checkbox"/> Change of scope (subsequent applications only) |
| Authorisation Period Requested: | <input type="checkbox"/> 3 Years (all first applications) | <input type="checkbox"/> 6 years |
| Authorisation Scope Requested: (Tick all areas which cover proposed gas work) | | |
| <input type="checkbox"/> Installing | <input type="checkbox"/> Altering | <input type="checkbox"/> Removing |
| <input type="checkbox"/> Servicing | <input type="checkbox"/> Repairing | <input type="checkbox"/> Testing |
| <input type="checkbox"/> Certifying | | |
| Type of Gas Devices Requested: | <input type="checkbox"/> All Type B gas devices (requires CPCPGS4023 competency) | |
| | <input type="checkbox"/> Type B stationary gas fuelled reciprocating engines only (requires UEPMNT367 and UEPMNT368 competencies) | |
| | <input type="checkbox"/> Specific Type B gas device (list) _____ | |
| Type of Gas: | <input type="checkbox"/> LPG | <input type="checkbox"/> Natural Gas (includes CSG) |
| | <input type="checkbox"/> Biogas | <input type="checkbox"/> Other: _____ |
| Maximum gas device capacity: | Installing: _____ GJ/hour | Servicing: _____ GJ/hour |

CURRENT or PREVIOUS LICENCES or AUTHORISATIONS

| | | | |
|--|---------------|---|--|
| Do you have a current, expired or cancelled gas licence issued in Queensland, another State, Territory or New Zealand? | | | |
| | | <input type="checkbox"/> Yes (list all below) | <input type="checkbox"/> No |
| Issuing State, Territory or New Zealand | Licence Class | Licence Number | Date expired/cancelled (if not current) |
| Issuing State, Territory or New Zealand | Licence Class | Licence Number | Date expired/cancelled (if not current) |
| Do you have a current, expired or cancelled gas work authorisation in Queensland? | | | Number: A _ _ _ _ |
| | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |

SKILLS MAINTENANCE STATEMENT *How will the authorisation holder ensure all persons undertaking gas work remain competent during the period of the authorisation eg, manufacturers' training, being familiar with relevant Standards, attendance at trade functions etc.*

DECLARATION * CEO / Applicant (*delete one)

Oaths Act 1867

Statutory Declaration

TO WIT

I _____
of _____, in the State of _____,

do solemnly and sincerely declare that:

- ♦ The information and attachments provided in this application are true and correct in every way.
- ♦ I am aware of the requirements under the *Petroleum and Gas (Production and Safety) Act 2004* and Regulation relating to Gas Work Authorisations, and have read the Queensland Gas Work Licence and Gas Work Authorisation Requirements document Part B Section 1 and 3, together with all other important notes detailed on this application form.
- ♦ I have a copy of the relevant Standards, as listed in Schedule 1 of the *Petroleum and Gas (Production and Safety) Regulation 2004*, that relate to the scope of work applied for.
- ♦ I will not carry out any gas work that is not authorised in any approved scope of work.
- ♦ I understand that the requirements in this declaration will form the conditions of the gas work authorisation, if granted.
- ♦ I will abide by all terms and conditions of the authorisation, if granted.
- ♦ If I surrender my authorisation, or if my authorisation is cancelled, I agree to immediately return all unused Gas System Compliance Certificates, Gas Compliance Plates and Gas Work Authorisation Certificate to the Petroleum and Gas Inspectorate.

and I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the Oaths Act 1867.

Taken and Declared before me, at _____

This _____ day of _____ 20 _____

Signature of declarant *

Justice of the Peace, or Commissioner for Declarations

Attachment 1 - Experience Log

A **separate** Experience Log must be completed for **every person** who will be undertaking the scope/s of gas work relevant to the Gas Work Authorisation, if granted. Please print additional forms if required.

Name:

| Approximate Date (last three years or last authorisation period) | Detail previous gas work undertaken Type of device, make, model, gas type and work undertaken ie install, test, remove, alter, maintain, repair, service. | Type B Gas Device Rating in GJ/hour | Gas System Compliance Certificate No (if known) | Authorisation Name/Number or Employer name and contact number eg A1999 – John Smith 0433 333 333 |
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INFORMATION FOR APPLICANT

| DOCUMENTS or INFORMATION REQUIRED TO BE SUBMITTED WITH THE APPLICATION |
|--|
| Full payment by either cheque to be made payable to Department of Natural Resources and Mines, or credit card (payment form attached). Only Mastercard and Visa are accepted. |
| Certified copy of Statement of Attainment for Type B competency unit CPCPGS4023 for all staff undertaking Type B gas work, and certified copy of front and back of any current or expired interstate Type B gas licence (if applicable). |
| Where only stationary gas fuelled reciprocating engines has been requested, a certified copy of Statement of Attainment for Stationary Gas Fuelled Reciprocating Engine competency units UPEMNT367A and UPEMNT368A for all staff undertaking Type B gas work. |
| Letter of application signed by the CEO or senior person responsible for providing adequate resources to ensure safety. |
| An organisational chart showing the names of each staff member who undertakes gas work. A sole trader (individual who does not employ staff) is not required to provide an organisational chart. |
| A separate Experience Log for each person undertaking gas work (Attachment 1) relevant to the scope of work applied for. |

- If an application is lodged without all the required information listed, it will be returned without being processed.
 - Full information is available in the relevant section of the Gas Work Licence and Gas Work Authorisation Requirements document Part B at <https://www.business.qld.gov.au/industries/mining-energy-water/resources/safety-health/petroleum-gas/gas/type-b> .
- Emailed or faxed applications will not be accepted or processed.
- In line with the Privacy Statement, Petroleum and Gas Inspectorate staff are unable to discuss the application with any other party other than the applicant.

FEES EFFECTIVE FROM 1 July 2016 to 30 June 2017:

Application Fee (non-refundable) per application \$ 71.80 **plus** Yearly Authorisation Fee (each year applied for) \$ 43.00
Total payable for interim three-year authorisation \$ 200.80 or **Total payable for full six-year authorisation \$329.80**
 Total payable for applications for *Change of Scope \$ 71.80
*(*an increase to the approved scope of a first issued authorisation cannot be applied for until reapplication at expiry).*

LODGEMENT OF ALL APPLICATIONS:

Gas Licence and Authorisation Unit
 Petroleum and Gas Inspectorate
 Department of Natural Resources and Mines

Enquiries only: gaslicence@dnrm.qld.gov.au
By Post: **PO Box 1475, Coorparoo Qld 4151**

GENERAL PRIVACY STATEMENT

The Queensland Government introduced Information Standard 42 - Information Privacy to ensure that the collection, use, disclosure and storage of personal information by government agencies are lawful and appropriate. This standard also obliges agencies to tell their clients why personal information is being collected and when it is being disclosed to third parties. The Department of Natural Resources and Mines collects information on this form under the *Petroleum and Gas (Production and Safety) Act 2004* (the Act) and Regulation to meet its obligations under that Act, and to facilitate and regulate the carrying out of responsible gas licensing in Queensland. Information collected on this form, whether or not it is contained in the Gas Licensing Database, may be disclosed to other Queensland Government Agencies, where such disclosure is necessary for the effective management of gas licensing in Queensland. Where information provided is commercial in confidence, it will be treated as confidential and will not be disclosed outside the agency unless the Department is legally required to do so. Further information on the department's privacy policy is available at www.dnrm.qld.gov.au.

OFFICIAL USE ONLY

| | | |
|------------------------|------------------------|--------------------------|
| PAYMENT: | Application Fee: \$ | Authorisation Fee: \$ |
| RECEIPT NUMBER: | | |

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Credit Card Payment Request

PAYEE DETAILS:

Full Name:

Address:

State:

Postcode:

Telephone: ()

Fax: ()

DESCRIPTION *(please tick appropriate boxes)*

| | |
|---|-----------|
| <input type="checkbox"/> Gas Work Authorisation fees (3 years) - \$200.80 | |
| <input type="checkbox"/> Gas Work Authorisation fees (6 years) - \$329.80 | |
| TOTAL | \$ |

PAYMENT DETAILS

Payment Type Mastercard Visa (Please Tick)

Amount of Payment \$..... Expiry Date /

Card Number _ _ _ _ _ | _ _ _ _ _ | _ _ _ _ _ | _ _ _ _ _

Cardholder's Name Phone No.

Cardholders Signature Date / /

Privacy Notice

The Department of Natural Resources and Mines is collecting the information on this form to charge your credit card for one of the purposes identified in the description section of this form. Only authorised departmental officers have access to this information and your information may be disclosed to your nominated financial institution for the purposes of processing this transaction. Your personal information will not be disclosed to any other third party without your consent, unless required to do so by law or for the purposes of the *Information Privacy Act 2009*.