# WHS (Mines and petroleum sites) legislation

## Who should use this form

This application form should be used by holders of a quarry manager practising certificate or who want to vary or revoke a condition of their certificate.

For example, a quarry manager practising certificate may contain conditions that limit the application of the certificate to a particular mine(s) only. Use this form to apply to add or remove a mine from the conditions of your certificate.

Please note, any request will mean the Resources Regulator will reassess your competence.

## Relevant legislation

Under the Work Health and Safety (Mines and Petroleum Sites) Regulation2014, a person:

* is eligible to hold a practising certificate in respect of a statutory function if the regulator is satisfied that the individual is competent to exercise that function
* must hold a practising certificate to exercise the statutory function of quarry manager, to supervise mining operations at a mine (other than underground mines or coal mines).

## Instructions

Please read the information sheet before completing this application form.

Your application must be accompanied by supporting documents to confirm your identity. All documentation must be certified by an independent authorised certifier.

Information about lodging your request is provided at the end of this form.

This form is fillable. The boxes are made to expand to include further information as required. Please click on the 'Enter' key in any box (except for tick boxes) to create a new row.

## Personal details

|  |  |
| --- | --- |
| First name/s\* |  |
| Last name |  |
| Preferred name |  |
| Salutation | Mr  Mrs  Ms  Miss  Dr  Other |
| Gender | Male  Female  Other |
| Date of birth (DD/MM/YYYY) |  |
| Place of birth (town/city, state) |  |
| Country of birth  (if other than Australia) |  |
| Home address (incl. suburb and postcode) |  |
| Postal address (incl. suburb and postcode) |  |
| Primary email address (preferred form of communication) |  |
| Home telephone |  |
| Mobile telephone |  |
| Current place of employment  (including company name and mine site name) |  |

\*Please note, you must provide your full legal name.

**Note:** Updates on the progress of your application will be emailed to your nominated email address(es). If you are issued a practising certificate, your certificate will be sent to your postal address. Please keep your contact details up to date with the mining competence team.

## Type of authorisation

Please indicate the type of authorisation you want to vary:

|  |  |
| --- | --- |
| Type of authorisation | Quarry manager practising certificate |

Please provide details of the authorisation you want to vary:

|  |  |
| --- | --- |
| Authorisation/certificate number |  |

## Details of variation

Please indicate the change you wish to make below and attach documentation (where relevant) evidencing why the condition should be varied or revoked:

|  |  |
| --- | --- |
| Changes requested | Add another mine  Remove a mine  Replace a mine with a different mine  Other, please specify |

## Details of mine site to be added (*if applicable*)

|  |  |  |  |
| --- | --- | --- | --- |
| Name of mine |  | | |
| Name of mine operator  (should match Regulator record) |  | | |
| ACN or ABN |  | | |
| Site address |  | | |
| Suburb |  | | |
| State |  | Postcode |  |
| Postal address |  | | |
| Suburb |  | | |
| State |  | Postcode |  |
| Total number of workers at the mine |  | | |
| Type of mine (for example, quarry, dredge, borrow pit) |  | | |
| Is blasting conducted at the mine? | Yes  No | | |

## Primary contact at the mine

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | | |
| Position/title |  | | |
| Email address |  | | |
| Telephone |  | Mobile |  |

## Details of mine site to be removed (*if applicable*)

|  |  |  |  |
| --- | --- | --- | --- |
| Name of mine |  | | |
| Name of mine operator  (should match Regulator record) |  | | |
| ACN or ABN |  | | |
| Telephone |  | | |
| Site address |  | | |
| Suburb |  | | |
| State |  | Postcode |  |

# Identity verification documents

Please tick the boxes below to indicate which documents are attached to your application. You must supply one document from the Group A list of documents and one document from the Group B list of documents.

You must attach a certified copy of all the documents provided. See section 4 of the information sheet for how to certify your documents.

|  |
| --- |
| Group A documents: must have name, date of birth and place of birth |
| Birth certificate  (If your name has since changed, please *also* provide certified copy of change of name or deed poll certificate) |
| Current passport |
| Expired passport that has not been cancelled and was current within the past two years |
| Other documents of identity having the same characteristics as a passport, including diplomatic documents and some documents issued to refugees |

|  |
| --- |
| Group B documents: must have photograph, name and current residential address (copy of both front and back of ID cards) |
| Driver’s licence issued by an Australian state or territory |
| Roads and maritime services (formerly RTA) photo card |
| Identification card issued by the Commonwealth, a State or Territory government as evidence of the person's entitlement to a financial benefit |

# Declaration

I declare that:

* to the best of my knowledge, the information provided in this form and any attachment(s) to this form, is true and correct in every detail
* I consent to the Department of Planning and Environment disclosing my personal information to the Mining and Petroleum Competence Board and any persons engaged for the purposes of managing practising certificates under the *Work Health and Safety (Mines and Petroleum Sites) Act 2013* and the Work Health and Safety (Mines and Petroleum Sites) Regulation 2014.

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | | |
| Position/title |  | | |
| Telephone |  | Mobile |  |
| Signature |  | | |
| Date |  | | |

**Note:** Giving false or misleading information is a serious offence under section 268 of the *Work Health and Safety Act 2011*, and *Part 5A of the Crimes Act 1900*.

Clause 144 of the Work Health and Safety (Mines and Petroleum Sites) Regulation 2014 provides for the cancellation of a practising certificate on a number of grounds, including if the certificate was improperly obtained, whether on the basis of false or misleading information.

## Checklist

To avoid delays in processing your application and to confirm that your form is ready for submission, use this checklist. Have you:

completed all the relevant fields in the personal details section?

selected a type of authorisation document

completed all the details of the change

provided identity documentation?

completed the declaration?

attached certified copies of documentation to support the change (for example, evidence of having completed a blasting course).?

## Submitting the form

We prefer that applications be submitted via email. Alternatively, you may mail your application form to us. Please only submit your application form via one method.

Email: [minesafety.competence@planning.nsw.gov.au](mailto:minesafety.competence@planning.nsw.gov.au) (preferred option)

Mail: Mining Competence Team, NSW Department of Planning and Environment,   
PO Box 344, HRMC NSW 2310

| **OFFICE USE ONLY** | |
| --- | --- |
| Date received: |  |
| ACES/COMET/RM8 ref: |  |
| Date register noted: |  |
| Registered post number: |  |
| Posted date: |  |
| Posted by: |  |

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Disclaimer: The information contained in this publication is based on knowledge and understanding at the time of writing (April 2019). However, because of advances in knowledge, users are reminded of the need to ensure that information upon which they rely is up to date and to check currency of the information with the appropriate officer of the NSW Department of Planning and Environment or the user’s independent advisor.

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