



Application for Renewal of a Triennial Certificate – Real Estate/Business Settlement Agent (Body Corporate)

APPLICATION CHECKLIST

Your application can only be processed if ALL of the relevant information and supporting documentation is provided. Use this checklist to ensure that you complete all parts of your application and have all necessary supporting documents ready to attach. Please check that:

- all sections of this form are complete;
- the Australian police check/s for each relevant person from an approved provider is/are ready to attach;
- a current copy of your Professional Indemnity and Fidelity Insurance Coverage from the Professional Indemnity and Fidelity Master Policy is ready to attach; and
- payment of the prescribed application fee is ready to be made.

APPLICATION FEE

The total fee payable includes a triennial certificate/licence fee and a contribution to the fidelity guarantee fund. A list of current fees is available on our website at www.commerce.wa.gov.au/CP/licensingfees. Cheques should be made payable to the Commissioner for Consumer Protection. For payment by credit card, please complete the following:

CREDIT CARD PAYMENT DETAILS

Card Type Visa Mastercard (Only Visa and Mastercard accepted)

Card Number

Card Holder Please print

Expiry Date / *I authorise the Department to deduct the current prescribed fee**

Signature / Authorisation Date

*Fees are subject to change on 1 July of each year

OFFICE USE ONLY

Licence No:	<input type="text"/>	Department Code	SA <input type="checkbox"/> SB <input type="checkbox"/>	Chart Description	<input type="checkbox"/> Application Fee <input type="checkbox"/> FRE Agents Fidelity Contribution; and
Total Fee	\$ <input type="text"/>			Chart Key	<input checked="" type="checkbox"/> C

GENERAL INFORMATION

In this form reference to “**the Act**” means the *Settlement Agents Act 1981* and its subsidiary legislation and “**the Commissioner**” means the Commissioner for Consumer Protection. “**Relevant persons**” means all the directors and all other persons concerned in the management or conduct of the body corporate, and includes the person in *bona fide* control of the business.

NOTE: only the fidelity fund fee is refundable if this application is withdrawn or not successful.

1. Licence Details

Licence Number: SA/SB

Name of body corporate:

ACN:

Name of person in
bona fide control:

2. Business Details

Business/Trading Name:

Principal Place of Business:

Postal Address:
(If different from above)

Address for the purpose of
the Register:
(This address will be publicly available,
see Regulation 7 under the *Act*)

Email address:

Business telephone number:

Mobile:

We use email and SMS for contact purposes and to send courtesy renewal reminders, so it is important that you notify the Commissioner should your electronic contact details change.

5. Professional Indemnity Insurance (PII)

The Commissioner cannot renew a triennial certificate unless the applicant is insured in accordance with section 35 of the Act. Please attach a current copy of your Professional Indemnity and Fidelity Insurance Coverage from the Professional Indemnity and Fidelity Master Policy.

For information about obtaining insurance under the Master Policy Agreement, contact Marsh Advantage Insurance on (08) 9426 0451 or visit www.marsh.com.

6. Financial Information

The Commissioner cannot grant a renewal unless (s)he is satisfied that the applicant has sufficient material and financial resources available to comply with the requirements of the Act.

Confidential Statement of Assets and Liabilities

To assist in determining whether you have sufficient material and financial resources a credit history check will be obtained as part of the application process.

Assets	\$
Liabilities	\$
Net Worth	\$

In addition to completing the above, please answer the following question:

Yes	No

Do you believe that the body corporate has sufficient financial resources to enable it to carry on business as an agent and to comply with the requirements of the Act?

7. Authorisation and Declaration - this section must be completed by ALL relevant persons

In order to assist with the determination of this application, I authorise the Commissioner, or persons so directed, to obtain on my behalf any document, record, file or information that may be necessary and relevant to consider my character and repute, and my fitness to be concerned as a director of, or in the management and control of, an agent's business. This includes but is not limited to records relating to my criminal history or current/previous occupational licences or other relevant information.

I confirm that I understand fully the duties and obligations imposed on me under the Act, Regulations, and associated Code of Conduct.

I understand that providing false or misleading information to the Commissioner or Chief Executive Officer is an offence under section 111A of the Act.

Name of Person	Signature	Date

Attach additional sheet if required

LODGEMENT OPTIONS

You may lodge your completed application:

By post addressed to:

Licensing Services

Department of Mines, Industry Regulation and Safety
Locked Bag 100,
EAST PERTH WA 6892

Licensing Advice Line: 1300 304 064
Overseas Callers: +61 8 6251 2931
General Enquiries: 1300 304 054

In person at:

Customer Service

Level 1, Mason Bird Building, 303 Sevenoaks Street
CANNINGTON
Hours: 8:30am to 4:30pm, Monday to Friday

Email: cplicensing@dmirs.wa.gov.au
Web Site: www.commerce.wa.gov.au/CP/licences