

## **Restoration of Name to the Electrical Licensing Register** (Electrician)

## Expired between two and five years

Form R140B

on 1 July each year.	Application checklist	Use this checklist reminder to ensure that you complete all parts of the application and attach all necessary supporting documents.
Personal and contact details completed.  Proof of competency in accordance with the "Evidence of Competency" section on page 2 of the application form.  Fit and Proper assessment – Australian Police Check attached.  Proof of identification in accordance with the attached Proof if Identity Sheet.  Declaration completed.  Payment Details (Payment will appear as "WA Gov – DMIRS" on your bank statement)  Cheque enclosed (made payable to Department of Mines, Industry Regulation and Safety)  Credit Card payment MasterCard Visa  Card Number MasterCard Visa  Cardholder's Name:  I authorise the Department to deduct the current prescribed fee, including any applicable late fee. Fees are subject to chang on 1 July each year.  Cardholder's Signature:  Date:		☐ Non-refundable restoration fee.
Proof of competency in accordance with the "Evidence of Competency" section on page 2 of the application form.   Fit and Proper assessment – Australian Police Check attached.   Proof of identification in accordance with the attached Proof if Identity Sheet.   Declaration completed.    Credit card details remain confidential		☐ Registration fee for <b>one year</b> OR ☐ Registration fee for <b>five years.</b>
application form.    Fit and Proper assessment – Australian Police Check attached.   Proof of identification in accordance with the attached Proof if Identity Sheet.   Declaration completed.    Payment Details   Payment will appear as "WA Gov – DMIRS" on your bank statement)     Cheque enclosed (made payable to Department of Mines, Industry Regulation and Safety)     Credit Card payment   MasterCard   Visa     Card Number   I   Expiry Date   I     Cardholder's Name:   Payment to deduct the current prescribed fee, including any applicable late fee. Fees are subject to change on 1 July each year.   Cardholder's Signature:   Date:   Date:		Personal and contact details completed.
Proof of identification in accordance with the attached Proof if Identity Sheet.  □ Declaration completed.    Declaration completed.    Payment Details		
Credit card details remain confidential  Payment Details (Payment will appear as "WA Gov – DMIRS" on your bank statement)  Cheque enclosed (made payable to Department of Mines, Industry Regulation and Safety)  Credit Card payment   MasterCard   Visa  Card Number   I   I   Expiry Date   I    Cardholder's Name:   (PLEASE PRINT)  I authorise the Department to deduct the current prescribed fee, including any applicable late fee. Fees are subject to change on 1 July each year.  Cardholder's Signature:   Date:		Fit and Proper assessment – Australian Police Check attached.
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Cardholder's Name: (PLEASE PRINT)  I authorise the Department to deduct the current prescribed fee, including any applicable late fee. Fees are subject to change on 1 July each year.  Cardholder's Signature: Date:		
I authorise the Department to deduct the current prescribed fee, including any applicable late fee. Fees are subject to change on 1 July each year.  Cardholder's Signature: Date:		Card Number / Expiry Date/
on 1 July each year.  Cardholder's Signature: Date:		Cardholder's Name: (PLEASE PRINT)
		I authorise the Department to deduct the current prescribed fee, including any applicable late fee. Fees are subject to change on 1 July each year.
Cardholder's contact phone number:		Cardholder's Signature: Date:
		Cardholder's contact phone number:
OFFICE USE ONLY		
Licence No:  Department Code  EL Chart Description  □ Application Fee □ Renewal Fee - 1 year or	Licence No:	Code Description ☐ Renewal Fee - 1 year
Total Due \$ Link Licence to payment Yes □ Renewal Fee – 5 years	Total Due	\$ Link Licence Yes □ Renewal Fee – 5 years

You may lodge your completed application:

By post addressed to: In person: **Enquiries Only** Telephone: (08) 6251 2000

**Licensing Services Customer Service** Department of Mines, Level 1, Mason Bird Building

Industry Regulation and 303 Sevenoaks Street CANNINGTON Safety

Locked Bag 100, Hours: 8:30am to 4:30pm

EAST PERTH WA 6892 Monday to Friday Email (Do Not Email Form)

electricallicensing@demirs.wa.gov.au

Internet

www.demirs.wa.gov.au/building-and-energy

Please ensure you have provided all required information and supporting documentation as per the application checklist. Failure to submit a complete application may result in the cancellation of your application and loss of the application fee.

Please print neatly in BLOCK LETTERS with a black or blue pen only

	Please print neatly in BLOCK LETTERS with a black or blue pen only
Details of electrician's licence to be restored	Licence No: Date Expired:
Applicant Details	Title:         Mr         Ms         Other           Surname:            Given Names:            Date of Birth:        //
Residential* address	*Required for publication on the Register. Cannot be a PO Box.  Street:  Suburb: State: Postcode:
Postal address*	As above *Address for correspondence from the Department.  Street: Suburb: State: Postcode:
Contact details	Home Phone: Work Phone:  Mobile Phone*:  Email*:  *Required to receive courtesy renewal reminder notifications via SMS and email and other important information related to your licence
Evidence of Competency	Expired between two and five years  If your electrician's licence has been expired between two and five years you are required to successfully complete the three hour Electrical Installing theory and four hour Electrical Installing practical examination or complete successfully the Electrical Trades Licensing (ETL) Course or hold a current Electrical Worker's licence from another State or Territory of Australia or New Zealand, please attach:  Evidence of successfully completing the three hour Electrical Installing theory and four hour Electrical Installing practical examination OR  Evidence of successfully completing the Electrical Trades Licensing (ETL) Course OR  A legible copy of both sides of your current licence from another State or Territory of Australia or New Zealand.  Note: An Applicant whose licence has expired between two and five years, who do not hold a current licence from another State or territory of Australia or New Zealand that can be mutually recognised, is required to successfully complete the three hour Electrical Installing theory and four hour Electrical Installing practical examination or Electrical Trades Licensing (ETL) course prior to submitting this application. To enrol in this training with a Registered Training Organisation you are required to obtain an approval letter from Licensing Services by contacting electricallicensing @demirs.wa.gov.au or (08) 6251 2000.

Fit and Proper Assessment	Australian Police Check: You must provide an Australian police check from the approved list of providers, available here: <a href="https://www.wa.gov.au/organisation/service-delivery/police-checks-licensing">https://www.wa.gov.au/organisation/service-delivery/police-checks-licensing</a> . The date of issue of the NCHC must be within three (3) months of the date you lodge it.
Proof of Identification	☐ Please attach proof of identification in accordance with the Proof of ID requirements, available here: <a href="https://www.wa.gov.au/media/50915/download?inline">https://www.wa.gov.au/media/50915/download?inline</a>
Declaration	Regulation 59 of the Electricity (Licensing) Regulations 1991 makes it an offence for a person to:
Licence holder to	falsify any matter pertaining to an application;
sign and	<ul> <li>provide any document or other evidence relating to qualifications or experience that is forged, false or fraudulent:</li> </ul>
date	provide any document in support of an application that is wrongfully represented as pertaining to the
	<ul><li>applicant; or</li><li>give a false testimonial in connection with this application.</li></ul>
	By signing this declaration, you give consent to the Electrical Licensing Board, duly authorised officers of the Department of Mines, Industry Regulation and Safety or persons acting on behalf of the Board or the Department to make enquiries and to receive and disclose any information for the purpose of determining this application.
	Declaration
	I .
	Full name of applicant
	authorise the Electrical Licensing Board, the Department of Mines, Industry Regulation and Safety or persons acting on behalf of the Board or the Department to make enquiries considered necessary to assess this application. My general consent includes the specific consent to the acquisition of copies of my criminal records. I agree that the Board can use any or all information received pursuant to this authority for the purposes of the assessment or audit of this application; and
	2 sincerely declare that this application is true and correct.
	Signature Date
	Signature Date