

STATUTORY DECLARATION – FOR MUTUAL RECOGNITION

Statutory Declarations Act 1959 (Commonwealth)

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I, Name in full
of Full residential address
whose current occupation is
whose security licence number is

hereby give notice, pursuant to the **Mutual Recognition (Australian Capital Territory) Act 1992**, that I am seeking recognition of a licence for an equivalent occupation in accordance with the **mutual recognition principle** and I **make the following declaration under the Statutory Declarations Act 1959:**

REQUESTED LICENCE PERIOD

<input type="checkbox"/> 1 Year	<input type="checkbox"/> 3 Years
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1	I am registered (or licensed) as a <u>Occupation</u> with the below subclass/es (only select those subclasses/licence types you wish to apply for in the ACT) endorsed on my current licence issued by: <u>STATE/TERRITORY</u>		
<input type="checkbox"/>	1A Patrol, guard, watch or protect property (including cash in transit)	<input type="checkbox"/>	1FP Guard with a firearm for protecting property
<input type="checkbox"/>	1B Act as bodyguard	<input type="checkbox"/>	2A Act as a security consultant
<input type="checkbox"/>	1C Act as crowd controller	<input type="checkbox"/>	2B Sell security equipment (not required if you are selling security equipment by wholesale only (other than directly to the public)
<input type="checkbox"/>	1D Guard with a dog	<input type="checkbox"/>	2C Carry out surveys and inspections of security equipment
<input type="checkbox"/>	1E Act as monitoring centre operator	<input type="checkbox"/>	2D Give advice about security equipment
<input type="checkbox"/>	1FC Guard with a firearm for cash in transit	<input type="checkbox"/>	2E Install, maintain, monitor, repair or service security equipment
<input type="checkbox"/>	Security Trainer Licence		

2	I am not the subject of disciplinary proceedings in any State or Territory (including any preliminary investigations or action that might lead to disciplinary proceedings) in relation to the occupation/s stated in 1.
3	There have been no changes in my criminal history since the issue of my registration/licence in: STATE/TERRITORY _____ that has not been notified to the issuing authority.
4	My registration/licence is not cancelled or currently suspended as a result of disciplinary action in any State or Territory.
5	I am not otherwise personally prohibited from carrying on the stated occupation in any State or Territory and am not subject to any special conditions in carrying on that occupation, as a result of criminal, civil or disciplinary proceedings in any State/Territory.
6	I am subject to the following special conditions in carrying on the stated occupation in State/Territory _____: _____ _____
7	I give my consent to the exchange of information with the authorities of any State or Territory or International Authority regarding my activities in the relevant occupation or otherwise regarding matters relevant to this notice.
8	I certify that evidence of my licence has been provided to Access Canberra with this application.

I declare that I will advise the Commissioner for Fair Trading if I am convicted or found guilty of, or commit without being convicted, a 'relevant offence' under the *Security Industry Act 2003* and of any incidents or charges that may disqualify me from holding a security licence or affect my suitability to hold a security licence.

I have read the privacy statement in this form and agree that the Commissioner for Fair Trading provide my information to law enforcement agencies and authorised organisations that have legal authority to request information under circumstances prescribed by law. I consent to the Australian Federal Police providing information to the Commissioner for Fair Trading in relation to criminal charges that may be laid against me. I understand that this may affect my continued eligibility to hold a security industry licence.

I understand that a **person who intentionally makes a false statement** in a statutory declaration is **guilty of an offence** under section 11 of the *Statutory Declarations Act 1959*, and I believe that the statements in this declaration are true in every particular. **AND:**

I acknowledge that if I make a false statement in this application I am committing an offence under the Criminal Code 2002 and criminal penalties up to 10 years imprisonment may apply.

I understand that if I make a false statement my business or professional indemnity insurance may not be honoured. All information provided in this application is true and correct to the best of my knowledge.

✘

Signature of person making the declaration

Declared at _____ On the _____ Day of _____ 20____

Before me ✘

Signature of witness

Full name of witness

Of Full residential address

whose qualification is _____

Note: A person who makes a false statement in a statutory declaration is guilty of an offence under the *Statutory Declarations Act 1959* (C'with) and the *Criminal Code 2002* (ACT). A Court can impose substantial fines and/or a term of imprisonment for these offences.

The list of persons before whom a statutory declaration may be made are in schedule 2 of the *Statutory Declarations Regulation 1993*, found

at: <http://www.comlaw.gov.au/comlaw/legislation/legislativeinstrumentcompilation1.nsf/current/bytitle/BAF4F2D92E09F45ACA256F71004C14F1?OpenDocument&mostrecent=1>

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