



**TAX INVOICE**

**APPLICATION TO VARY A LICENCE TO KEEP DANGEROUS SUBSTANCES**

*Dangerous Substances Act 1979*

**SafeWork SA - Licensing**

GPO Box 465, Adelaide SA 5001  
Level 4, World Park A  
33 Richmond Road  
Keswick SA 5035

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ABN: 50 560 588 327

[www.safework.sa.gov.au](http://www.safework.sa.gov.au)

**Assistance with this form can be obtained from the Dangerous Substances/Petroleum Products Regulation Act Information sheet, available at [www.safework.sa.gov.au](http://www.safework.sa.gov.au)**

**1. LICENCE TYPE**

To the Director SafeWork SA, I hereby apply (please tick box):

Vary a Licence to Keep Dangerous Substance as per the *Dangerous Substances Act 1979*

Current Dangerous Substance Licence Number

**IMPORTANT INFORMATION:**

Each application will be assessed (where relevant) on compliance with the requirements of AS 1940 - *The Storage and Handling of Flammable and Combustible Liquids*, AS/NZS 1596 - *The Storage and Handling of LP Gas*, the *Dangerous Substances Act 1979*, the *Dangerous Substance (General) Regulations 2017*

**2. APPLICANT DETAILS AS PER EXISTING LICENCE**

Australian Business Number (ABN)

Australian Company Number (ACN)

Registered Name of Body Corporate (if applicable)

Business Registration (trading) Name (if applicable)

**Name of the individual or contact person for body corporate**

Family Name

Given Name(s)

Title

M/F

Date of Birth

**Registered business address for body corporate (if applicable)**

Address Details

Suburb/Town

State/Territory

Postcode

Postal Address (if different from above)

Telephone No. (work)

Mobile No.

Facsimile No.

Email Address

Nature of business or undertaking being carried out

**3. SITE DETAILS**

Address of the site from which the dangerous substances will be stored

Address Details

Suburb/Town

State/Territory

Postcode

Telephone No. (work)

Mobile No.

Facsimile No.

**4. STORAGE DETAILS**

Dangerous Substance Name	Class (2,3,6,8)	Qty kl or kg (Max capacity)	Packing Groups I, II, III	Stored in tanks, drums etc

**5. SUPPORTING DOCUMENTATIONS**

**Detailed site plan must be attached (please tick box if attached)**

A detailed site plan showing buildings, fences, roads, ignition points, fire extinguishers, drainage bunding, signage and any other relevant information is attached.

**6. INSTALLER DETAILS - CLASS 2 ONLY**

Company Name

Contact Person

Telephone No.

Mobile No.

Facsimile No.

**7. DECLARATION**

I

Applicant Name

of

Applicant Address

Declare that the above details are true and correct

Personal signature of Public Officer/Secretary/Proprietor or Authorised Person

Date

**IMPORTANT INFORMATION:**

**If you do not provide all of the information required, your application will be returned to you unprocessed.**