Asbestos removal supervisor nomination form

Government of South Australia
SafeWork SA

Work Health and Safety Act 2012 (SA)
Work Health and Safety Regulations 2012 (SA)

For help completing this form, refer to the application guide available at safework.sa.gov.au.

Section 1: Licence holder details

☐ Nomination of a supervisor for a new Asbestos Removal Licence Application

☐ Current asbestos removal licence holder

Asbestos licence number Name on licence

Section 2: Type of change

☐ Add a supervisor (complete all sections of this form)

☐ Add a supervisor already authorised by SafeWork SA (complete Sections 3, 4 and 6)

☐ Remove a supervisor (complete Sections 3 and 6)

☐ Change a supervisor's personal details (complete Sections 3 and 6)

☐ Upgrade a supervisor's authorisation (complete all sections of this form)

☐ Add a supervisor to a mutually recognised licence (complete Sections 3, 4 and 6)

Section 3: Nominated supervisor details

Title: Family name: Given name(s):

Date of birth:

Contact phone: Email:

Address

Street:

Suburb: State: SA Postcode:

Section 4: Type of asbestos

Select the asbestos removal work for which the supervisor is seeking authorisation.

☐ Class A - Friable asbestos

☐ Class B - Non-friable asbestos

☐ For mutual recognition, provide evidence that the nominated supervisor has been authorised by the issuing authority and provide a copy of their driver's licence (front and back)

Has the nominated supervisor previously been authorised to supervise asbestos removal for the authorisation being sought?

☐ No. Go to Section 5

☐ Yes. Indicate below the asbestos removal work and the licence holder name and/or the licence number for whom you supervised the work

Asbestos licence number Name on licence

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Section 5: Evidence to support nomination

Class A Supervisor

☐ Evidence that each nominated supervisor has at least three years of relevant industry experience in the removal of friable asbestos. This includes a description of the work undertaken and written references that support the description if the work undertaken.

Copy of the certification issued to each name supervisor for the specified VET courses:

☐ CPCCDE3014 or CPCCDE3014A - Remove non-friable asbestos

☐ CPCCDE3015 or CPCCDE3015A - Remove friable asbestos

☐ CPCCDE4008 or CPCCBC4051A - Supervise asbestos removal

☐ Copy of drivers licence (front and back)

Class B Supervisor

☐ Evidence that each nominated supervisor has at least 12 months relevant industry experience in the removal of non-friable asbestos. This includes a description of the work undertaken and written references that support the description of the work undertaken (refer to the relevant application guide available at safework.sa.gov.au for an example of a written reference).

Copy of the certification issued to each named supervisor for the specified VET courses:

☐ CPCCDE3014 or CPCCDE3014A - Remove non-friable asbestos

☐ CPCCDE4008 or CPCCBC4015A - Supervise asbestos removal

☐ Copy of drivers licence (front and back)

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Section 6: Declaration

IMPORTANT INFORMATION: There are serious consequences for providing misleading or false information about any matter relevant to your application.

I consent to SafeWork SA making contact with any of my referees to verify my evidence or experience.

I consent to SafeWork SA making enquiries and exchanging information with WHS regulators in other states, territories or the Commonwealth on any matter relevant to this application.

I consent to SafeWork SA making enquiries and exchanging information with government agencies in South Australia and in other states, territories or the Commonwealth on any matter relevant to this application.

I consent to SafeWork SA making enquiries and exchanging information with any individuals or non-government agencies in South Australia and in other states, territories or the Commonwealth on any matter relevant to this application.

I declare that, to the best of my knowledge, the information provided in this application and supporting documentation is true and correct in every particular.

☐ I have read and agree to the declarations detailed above.

Nominated supervisor:

Signature:

Date:

Lodgement instructions

Send application and evidence to support application to:

Email: licensing.safework@sa.gov.au

Post: Licensing Team
SafeWork SA
GPO Box 465
Adelaide SA 5001

Fees: There are no fees associated with this application.