



## Application Guide for a Licence as a Pest Management Technician

1. This information has been prepared to assist you in applying for a *Licence as a Pest Management Technician*. Following this advice will enable speedy consideration of your application.

The *Pest Management Act 2001* provides for the granting and issue of licences that enable persons to perform pest control and fumigation activities. The carrying out of either of these activities, without lawful authority, is illegal and offenders are liable for prosecution.

2. Applications are processed only when all the information requested is provided. You will be notified by mail if the licence is granted.
3. When you complete the form, please print clearly and answer all questions in full.
4. Do *not* send original copies of your qualification documents. A *Result of Assessment* is not sufficient to process the application.
5. All forms requiring a signature must bear the original signature in ink. **Queensland Health is not able to accept a photocopy, facsimile (fax) or emailed copy of the completed form. Applications must be forwarded by POST to the address provided below.**

### How to complete an application

Please cross  each checkbox below as you complete the application form to ensure that you have provided all information requested.

#### Question 1

- Names are to be advised in full and exactly as they appear on your birth certificate. If you have ever been known by any other name, attach any copies of documentation that provides for formal changes of name, ie. deed poll, marriage certificate etc.

#### Question 2A and 2B

- The Company Name and the Australian Company Number (ACN) are to be advised in full and exactly as they appear on the *Certificate of Incorporation* issued by the Australian Securities and Investment Commission (ASIC).

#### Question 2C

- The business name is to be advised in full and exactly as it appears on the *Business Names Extract* issued under the *Business Names Act 1962*.

#### Question 2D

- Names of each business partner are to be advised in full and exactly as they appear on each partner's birth certificate. If a partner has ever been known by any other name, attach any copies of documentation that provides for formal changes of name, i.e. deed poll, marriage certificate etc.

#### Question 3

- Particulars of the business Queensland head office address are to be provided. If applicable, a postal address must also be stated. (Advise an interstate address only if a Queensland office base is not used).

#### Question 4

- This information relates to the physical premises located in Queensland where pesticides and/or fumigants are to be stored. Do not advise a post box address or a mobile telephone number.

#### Question 5

- A term for the licence of between one and five whole years has been nominated. Cross  1 box only. (Part of a year may not be nominated, ie. you cannot nominate 1 year 6 months).

### Question 6

- Full payment of the prescribed fee is attached.
- The method of payment has been identified.  1 box only.

**Note:** Credit card transaction may be made on the page titled *Credit Card Payments*.

### Question 7

#### (a) Pest control activity

Qualification documents must include a *Statement of Attainment* or full certificate indicating units of competency from the course *Asset Maintenance (Pest Management – Technical)* for the following categories:

- excluding timber pests: Units PRMPM05, PRMPM06 and PRMPM18
- including timber pests: Units PRMPM05, PRMPM06, PRMPM08, PRMPM10 and PRMPM18

- The category of licence has been selected.  1 box only.
- \*Certified true and correct photocopy of qualification document(s) is attached.

#### (b) Fumigation activity

Qualification documents must include a *Statement of Attainment* or full certificate with accompanying unit of competency PRMPM11 from the course *Asset Maintenance (Pest Management – Technical)* and all site environments for which the application is being made.

- The *site environments* required have been selected.  each box for which application is being made. The site environments selected must be listed on the Declaration of Assessment.
- \*Certified true and correct photocopy of qualification document(s) is attached
- \*Certified true and correct photocopy of a Declaration of Assessment.

The Declaration of Assessment is completed and issued by the accredited trainer and assessor engaged and authorised by a registered training organisation, to issue a Declaration of Assessment. The Declaration of Assessment is the assessor's testimony stating that the applicant has been assessed in and is competent for that particular site environment nominated in this application. Assessment usually involves the applicant actually performing a fumigation of the site environment in the presence of the assessor.

**\* Note:** Certified means that the document bears the original signature of either a Justice of the Peace, Commissioner for Declarations, or an officer of Queensland Health's Environmental Health Branch/Public Health Units. PHU contact details are located at [www.health.qld.gov.au/cho](http://www.health.qld.gov.au/cho) . **Queensland Health cannot accept documents that bear a photocopied or facsimile (fax) copy of the certification or signature.**

### Question 8

If you have answered YES, attach copies of the following documents where applicable:

- Minutes of conviction / court or tribunal order / police records search.
- ASIC order preventing an individual from managing a corporation.

Reported convictions are considered on a case-by-case basis. The *Pest Management Act 2001* contains provisions for appeal rights. Possible outcomes are: no action taken, application is refused, conditions placed on the licence.

### Question 9

- All checkboxes have been answered.
- The form is signed in ink with your original signature and dated.

NB Criminal history checks may be undertaken of a sample of applicants who have declared that they have no criminal history, for quality assurance purposes.

## Photographic and signature identification form

### Question 1

- Names are provided in full and exactly as they appear previously.

### Question 2

- The applicant's specimen signature block has been signed in ink in the presence of an authorised identifier (see section 2).
- Photographs that meet the specifications stated are attached. (Please ensure they are either glued or stapled in the white border).

### Question 3

- The identifier has signed and dated the back of your photographs in ink with his/her original signature

The identifier has:

- provided his / her full name
- completed the checkbox that identifies their qualification to verify your photographs and signature
- signed and dated the form in ink with his / her original signature.

### Credit card payments ▶ Return this page only if payment is being made by credit card transaction

- The card number is accurate and legible<sup>1</sup>. Do not overwrite any digits.
- The expiry date is completed and the card has not lapsed<sup>1</sup>. Do not overwrite any digits.
- The cardholder has signed and dated the form in ink.

<sup>1</sup> If an error is made, cross through the digit using a single line, write the correct digit above and initial the change.

## Refunds

Queensland Health can only provide a refund if:

- (a) the application is refused by the Chief Executive
- (b) the application is withdrawn prior to a decision being made.

## General information

For information about the regulation of pest management technicians, including respective legislation, please visit Queensland Health's Drugs and Poisons Policy and Regulation Unit website at [www.health.qld.gov.au/ph/ehu/drugs\\_poisons.asp](http://www.health.qld.gov.au/ph/ehu/drugs_poisons.asp).

## Return the application to:

Senior Licensing Officer  
**Drugs and Poisons Policy and Regulation Unit**  
Environmental Health Branch  
PO Box 2368  
FORTITUDE VALLEY BC Q 4006  
Tel: (07) 3328 9310

**Please do not return this fact sheet with the application**