



Form 70 – Application for issue of a WHS entry permit

seal

*Work Health and Safety Act 2011, s 131**Industrial Relations (Tribunals) Rules 2011, r 90*

Information

- A union is to use this form to apply for the issue of a Work Health and Safety Entry Permit to a person who is an official of the union.
- As this form contains a statutory declaration, you will need to have your signature witnessed by a Justice of the Peace, Commissioner for Declarations, Lawyer, or other qualified person.
- Please read this form carefully and complete all relevant sections.
- Attach to this application **one passport sized photograph** of the person to be authorised (see section 2 for more information).
- Please be advised, a Work Health and Safety Entry Permit has effect for a term of three years from the date it is issued, unless it is earlier revoked, or the permit holder ceases to be an official of the union, or the union is no longer registered under the relevant legislation.
- For further information please refer to the website www.qirc.qld.gov.au or contact the Industrial Registry on 1300 592 987 or via email at qirc.registry@qirc.qld.gov.au.

Application

This application for the issue of a Work Health and Safety entry permit is made to the Industrial Registrar pursuant to s 131 of the *Work Health and Safety Act 2011*.

Name of Registered
Organisation:

1. Registered Organisation's details

| | | | |
|-------------------------|-------------|----------------|----------|
| Postal/Service address: | | | |
| | Suburb/Town | | Postcode |
| Phone number: | | Mobile number: | |
| Email address: | | | |
| Name of contact person: | | | |
| Direct phone number: | | Mobile number: | |
| Direct email address: | | | |

2. Declaration

Take notice that I,

Name:

Position:

☐

President

☐

Secretary

☐

Authorised Person

Apply for the issue of a WHS permit on behalf of:

Name of official:

First Name/s:

Last Name:

Position of official:

☐

an officer

☐

an employee under s 131 of the Act

Additionally, I state that:

- (a) the passport sized photograph attached to this application is of the person to be authorised; and
- (b) the signatures appearing below are genuine signatures of the person to be authorised; and
- (c) I am authorised under the Act and Rules to make this application.

**Signature of President/
Secretary/ Authorised
Person:**

Date:

IMPORTANT

- Securely attach to this application one passport sized (4.5 cm x 3.5 cm) photograph of person to be authorised in a sealed envelope. **DO NOT staple through the photograph.**
- Ensure the photograph is signed on the reverse side by the person to be authorised.
- Person to be authorised is to complete the Statutory Declaration [Attachment A] to this application.

Signature of person to be authorised:

- Ensure the signatures of the person to be authorised do not extend beyond the 4.5 cm x 1 cm boundaries of the below signature boxes. The person to be authorised is to sign twice.

Signature 1

Signature 2

Attachment A – STATUTORY DECLARATION

QUEENSLAND
Oaths Act 1867
STATUTORY DECLARATION

| | |
|-----------------------|--|
| I [insert full name]: | |
| of [insert address]: | |

do solemnly and sincerely declare that

| | | |
|--|--------------------------------------|---|
| I am an official: | <input type="checkbox"/> officer | <input type="checkbox"/> employee under s 131 of the <i>Work Health and Safety Act 2011</i> |
| of the [insert name of Registered Organisation]: | | |
| I hold the position of: | | |
| I have held that position since: | | |
| I have satisfactorily completed the prescribed training: | Location: | |
| | Date: | |
| <input type="checkbox"/> A copy of the statement/certificate of completion is attached to this declaration and marked with the number 1. | | |
| <input type="checkbox"/> I hold | <input type="checkbox"/> I will hold | an entry permit under the <i>Fair Work Act 2009</i> |
| <input type="checkbox"/> I hold | <input type="checkbox"/> I will hold | an industrial officer authority (AIO) under the <i>Industrial Relations Act 2016</i> |

and I make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the *Oaths Act 1867*.

I declare that the contents of this statutory declaration are true and correct. Where the contents of this declaration are based on information and belief, the contents are true to the best of my knowledge and I have stated the source of that information and grounds for the belief.

I understand that it is a criminal offence to provide a false matter in a declaration, for example, the offence of perjury under section 123 of the Criminal Code.

I state that: [Declarant to complete – ***only tick if applicable*** – leave blank if not applicable]:

- ☐ This declaration was made in the form of an electronic document
- ☐ I electronically signed this declaration
- ☐ This declaration was made, signed and witnessed under Part 6A (Audio visual link) of the *Oaths Act 1867*.

DECLARED BY:

| Signature of person making the declaration | |
|---|--|
| Full name of declarant: | |
| Signature of declarant: | |
| Declared at [place]: | |
| Date: | |

| Alternative signature panel if substitute signatory signs | |
|---|--|
| Complete this section <u>only</u> if the declaration was signed by a substitute signatory (a person directed to sign the declaration on behalf of the declarant). | |
| Signed for and at the direction of the declarant by: | |
| Full name of substitute signatory: | |
| Signature of substitute signatory: | |
| Sworn/Affirmed at [place]: | |
| Date: | |

BEFORE ME:

| Witness details | |
|--|--|
| Full name of witness: | |
| Signature and type of witness: | |
| | <input type="checkbox"/> Justice of the Peace <input type="checkbox"/> Commissioner for Declarations <input type="checkbox"/> Lawyer |
| Date: | |
| Insert name of law practice/place of employment: | |

| For Special Witnesses (see s 12 of the <i>Oaths Act 1867</i>) |
|---|
| SPECIAL WITNESS to complete <i>[only tick if applicable]</i> |

For special witnesses only:

- ☐ I am a special witness under the *Oaths Act 1867* (see s 12 of the *Oaths Act 1867*).
- ☐ This document was made in the form of an electronic document.
- ☐ I electronically signed this document.
- ☐ This document was made, signed and witnessed under Part 6A (Audio visual link) of the *Oaths Act 1867* - I understand the requirements for witnessing a document by audio visual link and have complied with those requirements.