



Application for a Change of Details and/or Duplicate of a Security Licence under the Security Industry Act, 1997

Please use a BLACK or BLUE PEN. Print within the boxes in CAPITAL LETTERS [X]

PAYMENT OF FEES MUST ACCOMPANY THIS APPLICATION

Payment MUST be made by CHEQUE or MONEY ORDER, PAYABLE TO THE SECURITY INDUSTRY REGISTRY, or by CREDIT CARD (Bankcard, Visa, MasterCard). DO NOT SEND CASH.

The completed application form & fee should be forwarded to: The Security Industry Registry, Locked Bag 5099, Parramatta NSW 2124.

1 LICENCE DETAILS (as currently recorded by the Security Industry Registry)

Licence No. Identity No. (if known) Category(ies) of Licence
Last Name or Business Name
Given Name(s) (Only if an individual)

2 TYPE OF APPLICATION

Duplicate Licence with change of details Change of Name and/or Change of Address Go to Section 3
Duplicate Licence with same details Go to Section 4
Duplicate conditions and authority Go to Section 4

For current charges refer to the "Schedule of Fees"

3 CHANGE OF DETAILS

3.1 Change of Licence details for Classes 1 and 2 (NB: A copy of the marriage certificate/deed poll must be provided for a change of name.)

Last Name
Given Name(s)
Residential Address (Do not enter a PO Box number) Suburb/Town Postcode
Postal Address Suburb/Town Postcode
Date of Birth (DD MM YYYY) Female Male Telephone No. Drivers Licence No. and State of Issue

3.2 Change of Business details for Master Licence

Company Name
Business/Trading Name
Street Address (Do not enter a PO Box number) Suburb/Town Postcode
Postal Address Suburb/Town Postcode
Telephone Number

3.3 Change of Licence Holder (for Master Licence)

Last Name
Given Name(s)
Position in the Company (Director, Manager, Secretary etc.)
Residential Address (Do not enter a PO Box number) Suburb/Town Postcode
Postal Address Suburb/Town Postcode
Date of Birth (DD MM YYYY) Female Male Telephone No. Drivers Licence No. and State of Issue

3.4 Change of details of close associates

Add Delete

Last Name

 Given Name(s)

 Position in the Company (Director, Manager, Secretary etc.)

 Residential Address (Do not enter a PO Box number) Suburb/Town Postcode

 Postal Address (PO Box number acceptable here. If postal and residential address are the same, write 'AS ABOVE') Suburb/Town Postcode

 Date of Birth (DD MM YYYY) Female Male Drivers Licence No. Telephone No. State

If you have been previously known by another name, provide details below:

Last Name

 Given Name(s)

Add Delete

Last Name

 Given Name(s)

 Position in the Company (Director, Manager, Secretary etc.)

 Residential Address (Do not enter a PO Box number) Suburb/Town Postcode

 Postal Address (PO Box number acceptable here. If postal and residential address are the same, write 'AS ABOVE') Suburb/Town Postcode

 Date of Birth (DD MM YYYY) Female Male Telephone No. Drivers Licence No. and State of Issue

If you have been previously known by another name, provide details below:

Last Name

 Given Name(s)

4 DUPLICATE LICENCE or "CONDITIONS AND AUTHORITY"

I am applying for: Duplicate licence with the same details Change of Details Duplicate "Conditions and Authority"

Reason Duplicate is required:

(Provide full details of loss, theft or destruction, including the date of loss, theft or destruction)

5 DECLARATION

I,
(PRINT FULL NAME)

Certify that the information contained in this application is true and correct in every detail.

Applicants Signature

Date

FEE If paying by CREDIT CARD, please complete

BANKCARD MASTERCARD VISA

 Cardholders Name (in block letters)
 Amount \$ Expiry Date/..... Cardholders Signature