

## APPLICATION FOR AN APPROVED TECHNICIAN CERTIFICATE

### *Gaming Machine Act 2004*

Sections 74 and 75

### **Important information for applicants**

1. This application **must be completed in full** in black or blue print. Any question or section left unanswered or blank may result in the application form being returned to the applicant **OR** may result in the application not being considered. If a question does not apply or there is nothing to disclose insert N/A.
2. As part of the application process an applicant is required to undergo fingerprinting through the Australian Federal Police (AFP). Appointments can be made by telephoning the AFP on 6245 7351.
3. Applicants must also complete and submit to the AFP a *National Police Check Application Form* available from the AFP website: <http://www.afp.gov.au/what-we-do/police-checks/national-police-checks.aspx>. The code number for insertion on the AFP form is 30 and the mailing address for the police certificate should be noted as:

**ACT Gambling & Racing Commission**  
GPO Box 158  
CANBERRA ACT 2601

4. Applicants are **required to attach the following documentation to their application:**
  - a fully completed Statutory Declaration in relation to an Eligible Person (see Attachment to application)
  - a written statement from each approved supplier/employer stating that the applicant is competent to perform the functions of a technician and is employed or has offered to employ the applicant as an Approved Technician
  - if applicant is applying for a certificate in respect of their own business a written statement is to be submitted to this effect
  - a record of appointment for fingerprinting with the AFP
  - a **certified copy** of the applicant's **full birth certificate** (not an extract) or **current passport**
  - a **certified copy** of another form of identification eg. driver's licence, Medicare/credit/bank a/c card (*cards should be photocopied on both sides*)
  - an original or **certified copy** of the applicant's **consumer credit report** (not an extract) dated within 1 month of lodging an application. *Reports may take a minimum of 10 working days to process and can be obtained from VEDA ADVANTAGE <http://www.mycreditfile.com.au> or DUN & BRADSTREET <http://www.dnbcreditreport.com.au>.*
  - if applicant's name has changed, **certified copies** of supporting documentation such as a deed poll or marriage certificate
  - four (4) recent passport photographs with applicant's name clearly printed on the back
  - if born overseas, **certified proof** of Australian Citizenship, permanent residency or visa documentation permitting applicant to live/work in Australia

- if not an Australian Citizen, an applicant must provide a certified copy of a current police criminal check from their country of origin if they have resided in Australia for less than 5 years.
- 5. Applicants should ensure that they sign and date each page where required and note that failure to provide true, correct and full disclosure to any question on this form may result in the application being rejected.
- 6. If the space provided is insufficient to answer a question, please present relevant information on a separate attachment page.
- 7. When completed, **this application form, the required documentation, Statutory Declaration and determined fee** should be forwarded to:  
**ACT Gambling & Racing Commission**  
GPO Box 158 CANBERRA ACT 2601

Queries regarding this application should be directed to the Commission on 62072343 or email [Gaming.Operations@act.gov.au](mailto:Gaming.Operations@act.gov.au)

**PERSONAL INFORMATION**

Mr/Mrs/Miss/Ms (Circle)

Male

Female

..... Surname  
Given Name Middle Name/s

Other Names (aliases, nicknames, former names, maiden names) .....

Date of Birth: ...../...../..... Country of Birth: .....

**Residential address and contact details:**

..... Street ..... Suburb  
 ..... State ..... Postcode

Telephone: (.....) ..... Mobile Number: .....

Email address: .....

**Postal address: (if the same as the address provided above write "as above")**

..... Street ..... Suburb  
 ..... State ..... Postcode

Are you an Australian Citizen?  YES  NO

If you are a naturalised citizen of Australia state: (i) date and place of naturalisation .....  
 (ii) certificate number. ....

If you are a citizen of another country, state the country: .....

VISA category and number: .....

**Photographs:**

Securely attach four (4) colour passport photographs to your application. Ensure your name is clearly printed on the back of each photograph.

**CERTIFICATE INFORMATION**

Name of the Supplier(s) with whom you are or will be employed:

.....

Phone: ..... Facsimile: .....

Have you previously been issued with an Approved Technician Certificate in the ACT? :  YES  NO

If yes, please provide:

Certificate number	Supplier/Employer

**Applicant's signature:** ..... **Date:** ...../...../.....

Application for an Approved Technician Certificate

**RESIDENCES**

List all addresses at which you have lived during the past 5 years.  
**ACCOUNT FOR ALL PERIODS** – dates must be continuous, with no gaps.  
 Include any period of no fixed address and state reason eg. travel.

From	To	Address	City/State/Country	Post Code
Example 10/10/2005	10/1/2006	ANU – Bruce Hall	Canberra, ACT	0221
/ /	Present			
/ /	/ /			
/ /	/ /			
/ /	/ /			
/ /	/ /			
/ /	/ /			
/ /	/ /			
/ /	/ /			
/ /	/ /			

**EMPLOYMENT**

List all of your work history, both full and part time, and if applicable all periods of unemployment, schooling and all businesses with which you have been involved during the past 5 years.  
**ACCOUNT FOR ALL PERIODS** – dates must be continuous, no gaps.

From	To	Occupation	Employer Name
Example 10/10/2005	10/1/2006	Student	ANU
/ /	Present		
/ /	/ /		
/ /	/ /		
/ /	/ /		
/ /	/ /		
/ /	/ /		
/ /	/ /		
/ /	/ /		

Have you ever been dismissed, retrenched or suspended by an employer?  
 YES    NO (if yes provide details below).

.....  
 .....

**BUSINESS AFFILIATIONS**

List all business, partnerships, joint ventures, etc. with which you are currently associated and in which you actively participate in the management or operation thereof. Indicate any direct or indirect financial interest in any business.

.....  
 .....  
 .....  
 .....

**Applicant's signature:** ..... **Date:** ...../...../.....

## AUTHORISATION

### ACT GAMBLING AND RACING COMMISSION

To: All courts, probation departments, employers - current and previous, educational institutions, legal practitioners, banks, financial and other institutions, all agencies - Federal, State and Local, both foreign and domestic and to whomsoever else this authorisation may be duly presented.

From: .....  
Surname Other Names

of: .....  
Street Suburb State Postcode

Date of Birth: ..... / ..... / .....

I hereby authorise the ACT Gambling and Racing Commission ("the Commission") and the Australian Federal Police ("the Police") to conduct investigations into my background for the purpose of assessing my suitability to obtain or maintain an Approved Technician Certificate under the provisions of the *Gaming Machine Act 2004*.

I HEREBY AUTHORISE the Commission and the Police to access, inspect and obtain copies of:

- (a) any credit report, other report, legal or personal information derived from those reports that has any bearing on my credit worthiness, credit history, credit standing or credit capacity;
- (b) any loan information, cheque account records, savings deposit records, safe deposit box records, passbook records and bank statement sheets pertaining to me.
- (c) any records relating to investigations of my activities conducted by any State, Territory, Federal or overseas police force, crime investigation agencies, corporate regulatory agencies or any gaming or casino regulatory authorities;
- (d) any court records relating to any present or past civil or criminal court proceedings to which I am or was a party; and
- (e) any other document, record or correspondence pertaining to me.

You are HEREBY AUTHORISED to release to the Commission or the Police all the documents, reports, records and information requested by them.

One of the purposes for which this Authorisation has been given is to satisfy Section 18N(1) (ga(ii)) of the Commonwealth Privacy Act 1988 which provides that a credit provider may only disclose information when the individual concerned has provided written permission.

Signed: ..... Date: / /

*Applicant's signature*

**CHECKLIST FOR APPLICANTS PRIOR TO APPLICATION LODGEMENT**

1. All dates completed in the form Day/Month/Year.
2. Signatures and dates are inserted where indicated.
3. ALL required attachments (refer to table below) are attached.

An application NOT accompanied by ALL of the required attachments and the correct application fee is considered incomplete and may be returned to the applicant or may not be considered further by the Commission

<b>Provided</b>	<b>The following must be submitted WITH the application</b>
Yes/No	The determined fee. NOTE: This fee is not refundable.
Yes/No	A written statement from each supplier/employer stating that the applicant is competent to perform the functions of a technician and is employed, or has offered to employ the applicant as a Technician.
Yes/No	If applicant is applying for a certificate in respect of their own business a written statement to this effect.
Yes/No	A record of appointment for fingerprinting with the Australian Federal Police.
Yes/No	Four (4) recent passport photographs of the applicant (name printed clearly on the back of each photo).
Yes/No	Certified copy of applicant's full BIRTH CERTIFICATE (not an extract) or applicant's current PASSPORT.
Yes/No	Certified copy of another substantial form of identification (eg. driver's licence, credit card, bank account).
Yes/No	If born overseas, a certified copy of your Australian Citizenship, Permanent Residency Certificate or Visa permitting you to live or work in Australia.
Yes/No	If NOT an Australian Citizen a certified copy of a current police criminal check from the applicant's country of citizenship is required for applicants who have resided in Australia for less than 5 years.
Yes/No	If the applicant's name has changed, a certified copy of all the supporting documentation, eg. Marriage Certificate, Deed Poll.
Yes/No	The original or a certified copy of the applicant's CONSUMER CREDIT REPORT (not an extract) dated within 1 month of lodging this application. Credit checks may be obtained from: VEDA ADVANTAGE <a href="http://www.mycreditfile.com.au">http://www.mycreditfile.com.au</a> or DUN & BRADSTREET <a href="http://www.dnbcreditreport.com.au">http://www.dnbcreditreport.com.au</a> It is important to allow a minimum of 10 working days for processing.
Yes/No	A fully completed Statutory Declaration in relation to an Eligible person under the <i>Gaming Machine Act 2004</i> .

**\*Additional Notes:**

1. During the period in which this application is being processed and after any Certificate may have been issued, the applicant must notify the ACT Gambling and Racing Commission of any change in the applicant's address or any other matter set out in this application.
2. **Failure to provide a true, correct and complete answer to any question on this form may result in a refusal to grant a licence or the suspension or cancellation of any licence issued. A person who makes a declaration that is to his or her knowledge false in a material particular may be liable to prosecution for an offence under the *Statutory Declarations Act 1959 (Commonwealth)*.**

**OFFICE USE ONLY**

Certificate Number:	Short Term approval issued with expiry date of:        /        /
	Full approval issued with expiry date of:                    /        /

**Signature of approving Delegate of the Commission** ..... **Date**...../...../.....

**PRIVACY POLICY**

Personal information supplied by an applicant is collected, used and stored in accordance with the *Privacy Act 1988* and the ACT Gambling and Racing Commission’s privacy policy. A full copy of the Commission’s privacy policy may be obtained either from its website at <https://www.act.gov.au/privacy> or by contacting the Commission on 62072343.

In accordance with the Information Privacy Principles you are able to gain access to any personal information held about you by the Commission.

**PAYMENT DETAILS**

**IMPORTANT INFORMATION**

The prescribed fee must accompany an application for an Approved Technician Certificate. Please note that once an application is submitted to the ACT Gambling and Racing Commission the application fee is non-refundable.

The determined fee is available on the Commission website:

<https://www.gamblingandracing.act.gov.au/industry/forms-and-fees/gaming-machines> or by contacting the Commission on 62072343.

Please indicate the method of payment:

- money order or cheque made payable to the ACT Gambling and Racing Commission;
- credit card (Visa or Master Card). Please complete the required details in the area provided below.

**PAYMENT BY CREDIT CARD**

Card type     Master Card         Visa    Amount \$ ..... (maximum of \$3,000)

Card Number: \_ \_ \_ \_ / \_ \_ \_ \_ / \_ \_ \_ \_    Expiry Date: \_ \_ / \_ \_

Name on Card: .....    Signature: .....

**THIS SECTION FOR OFFICE USE ONLY**

Processed by: .....    Date: ...../...../.....    Reference Number: .....  
(Authorised Officer)

**Applicant’s signature:** .....    **Date:** ...../...../.....





I understand that a person who intentionally makes a false statement in a statutory declaration is guilty of an offence under section 11 of the *Statutory Declarations Act 1959*, and I believe that the statements in this declaration are true and correct in every particular.

Signature of Applicant \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Declared at \_\_\_\_\_ on \_\_\_\_\_ of \_\_\_\_\_

(Place)

(Day)

(Month and Year)

Before me, \_\_\_\_\_ Name of Witness

\_\_\_\_\_  
(Signature of Witness)

(FULL NAME IN BLOCK)

of \_\_\_\_\_  
(STREET) (SUBURB) (STATE) (POSTCODE)

QUALIFICATION: \_\_\_\_\_  
(see below)

*Note 1* A person who intentionally makes a false statement in a statutory declaration is guilty of an offence, the punishment for which is imprisonment for a term of 4 years — see section 11 of the *Statutory Declarations Act 1959*.

*Note 2* Chapter 2 of the *Criminal Code* applies to all offences against the *Statutory Declarations Act 1959* - see section 5A of the *Statutory Declarations Act 1959*.

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A statutory declaration under the *Statutory Declarations Act 1959* may be made before—

(1) a person who is currently licensed or registered under a law to practise in one of the following occupations:

Chiropractor Dentist Legal practitioner Patent attorney Medical practitioner Nurse Optometrist Pharmacist  
Physiotherapist Psychologist Trade marks attorney Veterinary surgeon

(2) a person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described); or

(3) a person who is in the following list:

Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public (b) a non-commissioned officer within the meaning of the *Defence Force Discipline Act 1982* with 5 or more years of continuous Australian Consular Officer or Australian Diplomatic

Officer (within the service; or

meaning of the *Consular Fees Act 1955*)

Bailiff

Bank officer with 5 or more continuous years of service

Building society officer with 5 or more years of continuous service

Chief executive officer of a Commonwealth court

Clerk of a court

Commissioner for Affidavits

Commissioner for Declarations

Credit union officer with 5 or more years of continuous service

Employee of the Australian Trade Commission who is:

(a) in a country or place outside Australia; and Notary public

(b) authorised under paragraph 3 (d) of the *Consular Fees Act 1955*; Permanent employee of the Australian Postal Corporation with 5 or and more years of continuous service who is employed in an office

(c) exercising his or her function in that place supplying postal services to the public

Employee of the Commonwealth who is:

(a) in a country or place outside Australia; and (a) the Commonwealth or a Commonwealth authority; or

(b) authorised under paragraph 3 (c) of the *Consular Fees Act 1955*; (b) a State or Territory or a State or Territory authority; or

and

(c) a local government authority;

(c) exercising his or her function in that place with 5 or more years of continuous service who is not specified in Fellow of the National Tax

Accountants' Association another item in this list

Finance company officer with 5 or more years of continuous service

Person before whom a statutory declaration may be made under the

Holder of a statutory office not specified in another item in this list

law of the State or Territory in which the declaration is made

Judge of a court

Justice of the Peace Registrar, or Deputy Registrar, of a court Magistrate

Marriage celebrant registered under Subdivision C of Division 1 of Part IV of the *Marriage Act 1961*

Master of a court

Member of Chartered Secretaries Australia

Member of Engineers Australia, other than at the grade of student Teacher employed on a full-time basis at a school or tertiary Member of the Association of Taxation and Management Accountants education institution

Member of the Australian Defence Force who is:

(a) an officer; or

Police officer

Senior Executive Service employee of:

(a) the Commonwealth or a Commonwealth authority; or

(b) a State or Territory or a State or Territory authority

Sheriff

Sheriff's officer