

E116 – Government magazine access card application form

Individuals only

Explosives Act 1999



Resources Safety & Health
Queensland

Important information on completing this application form

- This application form is intended for an individual applying for a new or replacement access card to enter a government magazine unsupervised. **Government magazine** means a place declared to be a government magazine under section 46(1) of the *Explosives Act 1999*.
- Where documents are required to be certified, they must be a certified copy of the original document and be certified only by a lawyer, justice of the peace, notary public or commissioner for declarations.
- The information entered onto this form must be printed in blue or black ink.
- Each box in the relevant sections 2, 3 & 4 of this form must be completed.
- The application form must be; completed in full, signed and dated.
- The application form must be submitted in person at the relevant government magazine along with a valid security clearance OR posted to your nearest [regional office](#) with a certified copy of your security clearance.
- Ensure the correct fee(s) is paid (refer [Information Bulletin No 63](#)).

SECTION 1 – SECURITY CLEARANCE DETAILS:

SECURITY CLEARANCE NO:
(Provide if known, first 8 digits only)

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Please note that your application will be refused if you do not hold a valid security clearance when making your application for a government magazine access card.

Continue to [section 2](#)

SECTION 2 – INDIVIDUAL DETAILS:

Title:	First name:	Middle name(s):	Last name:	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Date of birth:	Place of birth:	Current nationality:	Gender:	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Female <input type="checkbox"/> Male	
Drivers licence number:	Drivers licence state:	Email:		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Business phone:	Private phone:	Mobile phone:	Emergency phone:	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Residential address:	Suburb or town:	State:	Post code:	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Postal address (<input type="checkbox"/> Same as above):	Suburb or town:	State:	Post code:	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

Continue to [section 3](#)

SECTION 3 – GOVERNMENT MAGAZINE ACCESS CARD DETAILS (Required):

a. Which government magazine do you require access too?

Helidon Bajool Queerah Brookhill

b. Application type

New application Replacement of lost or stolen government magazine access card

c. What occupation are you employed in?

Cleaner Consultant Courier General contractors/earthmoving
 Import contractor Maintenance contractor Plumber Site employee
 Truck driver Water delivery Other (please specify below)

d. What frequency will you require access to the government magazine?

Daily Weekly Monthly Yearly Other (please specify)

e. Provide a further detailed statement on why you require a government magazine access card (mandatory)

Continue to [section 4](#)

SECTION 4 – PRIVACY STATEMENT AND DECLARATION

Privacy statement

Resources Safety & Health Queensland collects personal information from you, including your name, contact details, biometric information and information about your eligibility for an occupational authority. We collect this information to process your application for an authority and for administering authorities generally. The *Explosives Act 1999* allows or authorises us to collect this personal information. Your information may be reproduced on your authority, used in the administration of your authority and may be shared with other persons, including other Australian and New Zealand explosives regulators. This may include publishing authority details, other than your contact details, in an online register of authority holders. Your information may also be used to provide you with explosives safety updates, for statistical research, for auditing purposes, evaluation and reporting of our services. We will only use your information for these purposes. It will otherwise not be used or disclosed unless authorised or required by law. Your personal information will be handled in accordance with the *Information Privacy Act 2009*.

DECLARATION: I hereby make application and declare the information provided to be true and accurate to the best of my knowledge at this time. Should this application be successful, I agree to comply with the *Explosives Act 1999*, *Explosives Regulation 2017* and any conditions imposed.

Title: **First name:** **Last name:**

SIGNATURE (PLEASE SIGN WITHIN BOX)

_____ **DATE**

End of application.

OFFICE USE ONLY

<input type="checkbox"/> Approved	Government magazine manager name (or delegate):		
<input type="checkbox"/> Not approved	Date:		Signature:
Comments:			