

# E117 – Voluntary surrender of security clearance or licence

Individuals, Corporate or Partnership  
*Explosives Act 1999*



Resources Safety & Health  
Queensland

## Important information on completing this application form

- This application form is intended for a person to voluntarily surrender a security clearance and/or licence to the Chief Inspector of Explosives (refer to S31 *Explosives Act 1999* and S23 *Explosives Regulation 2017*). This will apply when the licence holder no longer wishes to hold a security clearance or licence issued under the *Explosives Act 1999*.
- This application form may be used to surrender more than one licence held by the licence holder.
- 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.
- Part of the licence fee paid may be refunded for a licence issued for longer than 1 year. The amount that may be refunded is the licence fee for each whole year of the unexpired term of the licence. No refunds are applicable in relation to the surrender of a security clearance.
- The information entered onto this form must be printed in blue or black ink.
- The original of the security clearance or licence(s) to be surrendered must be returned with this form.
- Attach any other supporting document, such as a statutory declaration to declare why the original licence cannot be returned.
- The application form must be; completed in full, signed and dated.

## SECTION 1 – SECURITY CLEARANCE OR LICENCE DETAILS:

Name of security clearance AND/OR licence holder (as displayed on the licence or security clearance):

Security clearance number AND/OR Licence number(s) for surrender:

Security clearance AND/OR Licence(s) for surrender (tick as appropriate):

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Security clearance | <input type="checkbox"/> Transport            | <input type="checkbox"/> Collect ammunition                    |
| <input type="checkbox"/> Import             | <input type="checkbox"/> Use                  | <input type="checkbox"/> Manufacture-factory                   |
| <input type="checkbox"/> Export             | <input type="checkbox"/> Fireworks operator   | <input type="checkbox"/> Manufacture-place of use              |
| <input type="checkbox"/> Sell               | <input type="checkbox"/> Fireworks contractor | <input type="checkbox"/> Manufacture-mobile manufacturing unit |
| <input type="checkbox"/> Store              | <input type="checkbox"/> Shotfirer            | <input type="checkbox"/> Explosives driver licence             |

Reason for voluntary surrender:

- No longer work in Qld    No longer work in industry    No longer use vehicle    Sold business
- Other: \_\_\_\_\_

Continue to [section 2](#)

## SECTION 2 – CERTIFICATION:

I, the undersigned, as authorised, certify that:-

- No further activities will be carried out under the licence(s)/security clearance nominated above; and
- I understand that a person is not an appropriate person to hold, or to continue to hold, a security sensitive authority if the person does not hold a security clearance; and
- I understand that a person must not have unsupervised access to explosives if the person does not hold a security clearance; and
- I understand that it is an offence under Section 34(1) of the *Explosives Act 1999* to possess explosives without the appropriate authority and am no longer in possession of explosives associated with the licences nominated above; **or**
- I am a prescribed ammunition collector under Section 48 of the Explosives Regulation 2017 that permits me to possess, collect or sell ammunition.

**SIGNATURE**

\_\_\_\_\_  
**DATE**

**Print name in full**

Title

First name

Middle name(s)

Surname

**Note: For corporate licence holders and partnerships – the person signing this form must be the authorised contact, responsible person, or a director/partner.**

**Privacy Disclaimer:** 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*.

**Continue to [section 3](#)**

## SECTION 3 – DECLARATION:

**Have the originals of the surrendered security clearance/licences been attached to this form? Y / N**

**If no, provide a reason why:** \_\_\_\_\_

**I declare that the licences nominated on this form are hereby surrendered pursuant to Section 31 of the *Explosives Act 1999*.**

**Note: For corporate licence holders and partnerships – the person signing this form must be the authorised contact, responsible person, or a director/partner.**

**Print name in full**

Title

First name

Middle name(s)

Surname

**SIGNATURE**

\_\_\_\_\_  
**DATE**

*End of application.*