



WORKER REGISTRATION APPLICATION

Units 32 - 33, 12 Charlton Court, Stuart Park NT 0820

PO Box 36644, Winnellie NT 0821

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WORKER DETAILS (Includes labour only contractor)

SURNAME		GIVEN NAMES	
<input type="text"/>		<input type="text"/>	
MAILING ADDRESS			
<input type="text"/>			
SUBURB			POSTCODE
<input type="text"/>			<input type="text"/>
TELEPHONE	MOBILE	DATE OF BIRTH	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
EMAIL ADDRESS (CASE SENSITIVE)			
<input type="text"/>			
ARE YOU	<input type="checkbox"/> An employee or	<input type="checkbox"/> A labour only contractor	<input type="text"/> Date commenced in NT construction industry if a labour only contractor
DESCRIBE THE TYPE OF WORK YOU PERFORM (E.g. Electrician, Labourer etc)			
<input type="text"/>			

YOUR CURRENT EMPLOYER DETAILS (Not applicable for labour only contractors)

EMPLOYER NAME			
<input type="text"/>			
MAILING ADDRESS			
<input type="text"/>			
			POSTCODE
<input type="text"/>			<input type="text"/>
CONTACT PERSON FOR ENQUIRIES		DATE COMMENCED WITH THIS EMPLOYER IN NT	
<input type="text"/>		<input type="text"/>	
TELEPHONE	FACSIMILE	MOBILE	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
EMAIL ADDRESS (CASE SENSITIVE)			
<input type="text"/>			

SERVICE DETAILS

Service can be backdated up to a maximum of 12 months prior to the date we receive your application. Please complete the back of this form with details of each employer you have worked for in the Northern Territory during this period.

You will need to attach documentary evidence such as copies of payslips or PAYG Tax Summaries.

Your employer may also apply to NT Build to register continuous service prior to 1 Jan 2005 provided it remains unbroken after 1 July 2005. (see transitional service application).

INTERSTATE SERVICE

PLEASE PROVIDE YOUR REGISTRATION NUMBER IF YOU ARE REGISTERED IN ANOTHER STATE OR TERRITORY							
WA	REGISTRATION NUMBER	VIC	REGISTRATION NUMBER	NSW	REGISTRATION NUMBER		
<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>		
SA	REGISTRATION NUMBER	ACT	REGISTRATION NUMBER	QLD	REGISTRATION NUMBER	TAS	REGISTRATION NUMBER
<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>

DECLARATION

I declare the details on this form are true and correct to the best of my knowledge.	SIGNATURE	DATE
	<input type="text"/>	<input type="text"/>

OFFICE USE ONLY

Approved <input type="checkbox"/>	Refused <input type="checkbox"/>	BY	Date	SCANNED:
		<input type="text"/>	<input type="text"/>	<input type="text"/>

BACKDATED SERVICE DETAILS

EMPLOYER NAME		
EMPLOYER ADDRESS		POSTCODE
EMPLOYER TELEPHONE	EMPLOYER MOBILE PHONE	WERE YOU <input type="checkbox"/> An employee or <input type="checkbox"/> A labour only contractor
START DATE	CEASE DATE	WAS WORK PERFORMED IN NORTHERN TERRITORY <input type="checkbox"/> YES <input type="checkbox"/> NO
DESCRIBE THE TYPE OF WORK YOU PERFORMED		
OFFICE USE ONLY Approved <input type="checkbox"/> Refused <input type="checkbox"/> BY _____ Date _____		

EMPLOYER NAME		
EMPLOYER ADDRESS		POSTCODE
EMPLOYER TELEPHONE	EMPLOYER MOBILE PHONE	WERE YOU <input type="checkbox"/> An employee or <input type="checkbox"/> A labour only contractor
START DATE	CEASE DATE	WAS WORK PERFORMED IN NORTHERN TERRITORY <input type="checkbox"/> YES <input type="checkbox"/> NO
DESCRIBE THE TYPE OF WORK YOU PERFORMED		
OFFICE USE ONLY Approved <input type="checkbox"/> Refused <input type="checkbox"/> BY _____ Date _____		

EMPLOYER NAME		
EMPLOYER ADDRESS		POSTCODE
EMPLOYER TELEPHONE	EMPLOYER MOBILE PHONE	WERE YOU <input type="checkbox"/> An employee or <input type="checkbox"/> A labour only contractor
START DATE	CEASE DATE	WAS WORK PERFORMED IN NORTHERN TERRITORY <input type="checkbox"/> YES <input type="checkbox"/> NO
DESCRIBE THE TYPE OF WORK YOU PERFORMED		
OFFICE USE ONLY Approved <input type="checkbox"/> Refused <input type="checkbox"/> BY _____ Date _____		

PRIVACY

NT Build is collecting the information on this form for the purpose of administering the *Construction Industry Long Service Leave and Benefits Act*. In appropriate cases, the information may be accessed by government agencies, private organisations and members of the public as required or permitted by law, or where that information is required to be provided to another state authority for the purpose of making a Long Service leave payment to the beneficiary.

For more information please refer to the Privacy and Access policies (available at http://www.ntbuild.com.au/ntbuild/info_privacy_foi.shtml) issued in accordance with the *Information Act* (NT) or contact the Registrar, NT Build on 1300 795 855.

Please post completed form in an envelope to: **NTBuild**
PO Box 36644
Winnellie NT 0821