



Mutual Recognition Application for a Licence

SECURITY AND RELATED ACTIVITIES (CONTROL) ACT 1996

WESTERN AUSTRALIA
POLICE FORCE
LICENSING SERVICES

LICENSING ENFORCEMENT DIVISION
303 Sevenoaks Street Cannington, Western Australia 6107
Post: Locked Bag 9 East Perth WA 6892
Email: securitylicensing@police.wa.gov.au
Telephone: 1300 171 011

You must carefully complete all sections and attach all required documents
INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

Section 1. Personal Details

- Record your full name, residential address, postal address, date and place of birth and all telephone numbers and email addresses
- Complete details of your physical description
- Enter the year and state you arrived in Australia
- Enter your Motor Driver Licence number

Section 2. Licence Category

- Select which category of licence you wish to obtain and tick the corresponding box
- Select the term of licence required

Section 3. Personal History

Disciplinary Action

Record the details of any Security Industry licences previously refused, suspended, disqualified and revoked. Detail the state, reason for the decision and date the disciplinary action occurred.

Conviction History

Record any details of any findings of guilt and penalty imposed by a court, whether within Australia or overseas

This encompasses Criminal or Children's Court convictions (include Spent Convictions or where a non conviction was recorded)

Previous Names

Provide details of any other names that you have been known by

Employment History

Provide details of your employment history for the past five (5) years

Section 4. Signing the Declaration

- Sign and date the form

Application Checklist

- Correct licence types nominated
- All application details completed including Code of Conduct
- Full particulars of personal history, including criminal record
- All relevant documentation provided
- Australian Standard Passport photos



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Documents Required for a Licence Application

PROOF OF AGE AND IDENTITY

Applicants must provide evidence of age and identity to accompany this application:

Two (2) documents referred to in the Category 1 list; or

One (1) document referred to in the Category 1 list and two (2) documents referred to in the Category 2 list

CATEGORY 1:

- Current motor driver's licence bearing the name, date of birth and photograph of the applicant that has been issued in Australia
- Current passport or a passport that has not been expired for more than two (2) years, bearing the name, date of birth and photograph of the applicant
- Proof of age card bearing the name, date of birth and photograph of the applicant
- Identification card (other than a proof of age card) bearing the name, date of birth and a photograph of the applicant that has been issued by a government agency in Australia
- Birth certificate bearing the name and date of birth of the applicant issued in Australia
- Diplomatic document bearing the name, date of birth and photograph of the applicant that has been issued by a government agency to provide evidence of a person's legal entitlement to enter Australia

CATEGORY 2:

- Current licence (other than a motor driver's licence) or current permit bearing the name and date of birth of the applicant that has been issued by a government agency in Australia
- Current identity card or licence bearing the name and date of birth of the applicant that has been issued by a government agency outside Australia
- Identification card bearing the name of the applicant that has been issued in Australia to provide evidence of the person's entitlement to a health benefit or pensioner concession
- Identification card bearing the name of the applicant that has been issued within the last five (5) years by an Australian educational institution

PASSPORT PHOTOS

Australian standard passport photos. These can be obtained from Australia Post.

Photographs are to display the head and shoulders (full face), and be on a white or light background.

No eye-altering contact lenses or shaded glasses are to be worn.

FINGERPRINTING

Your fingerprints will be taken as a requirement of this application and may be compared with or put in a Forensic database within the meaning of the Criminal Investigation (Identifying People) Act 2002

COMPLETE APPLICATIONS CAN ONLY BE LODGED IN PERSON AT

Licensing Services Security
303 Sevenoaks Street, CANNINGTON WA 6107



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APPLICANT MUST PERSONALLY COMPLETE THIS ENTIRE APPLICATION IN CAPITAL LETTERS

Section 1. Personal Details

LICENCE HOLDER DETAILS

Surname

All Given Names

Date of Birth
DD/MM/YYYY

Gender

Driver's
Licence

Country of Birth

Date arrived
in Australia

State of
Arrival

Eye Colour

Hair
Colour

Height

Complexion

CONTACT ADDRESS - Postal

Unit / Street Number

Street
Name

Street
Type

Suburb

State

Postcode

CONTACT ADDRESS - Residential

Tick if Postal Address is the same as Residential Address

Unit / Street Number

Street
Name

Street
Type

Suburb

State

Postcode

CONTACT DETAILS

Mobile Phone

Other
Phone

Email

Section 2. Licence Category

Term of Licence

1 year

3 years

Security Installer (tick class)

Security Consultant (tick class)

Security Officer

Crowd Controller

Locksmith

Locksmith

Security Monitoring Officer

Investigator

Alarms/CCTV

Alarms/CCTV

Security Bodyguard

Doors

Doors

Locks only

Security Risk Management

Section 3. Personal History

Have you ever been refused any Security Industry licence, or had such licences suspended, disqualified or revoked?

No

Yes - Provide details below

Type of Licence

Date

Location

Reason



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Section 3. Personal History *continued*

Have you ever been found guilty of an offence by a court?

(Include all criminal, children's court, spent convictions, or findings of guilt where a non-conviction was recorded)

No Yes - Provide details below

Conviction	State	Country	Year of Outcome
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Have you been known by any other name?

No Yes - Provide details below

Surname	First Name	Reason for former name
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Employment History (last 5 years, include any education and periods of unemployment)

Employer/Establishment	Location	Position/Role	Number of Years
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Section 4. Declaration

I certify that the information contained in this application has been provided by myself and is true and correct in every particular and that I completed this application in my own handwriting. I am aware that it is an offence under Section 51 of the Security and Related Activities (Control) Act, 1996 to provide false or misleading information.

Applicant's Full Name

Applicant's
Signature

Date



Mutual Recognition Statutory Declaration (Western Australia) Act 2001

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IN ACCORDANCE WITH THE SECURITY AND RELATED ACTIVITIES (CONTROL) ACT 1996

Commonwealth of Australia
STATUTORY DECLARATIONS ACT 1959
STATUTORY DECLARATIONS REGULATIONS 1993
*Mutual Recognition Act (Cth) 1992 as adopted by
Mutual Recognition (Western Australia) Act (WA) 2001*

APPLICANT MUST PERSONALLY COMPLETE THIS ENTIRE APPLICATION IN CAPITAL LETTERS

Personal and Licence Details

I (full name)

Unit / Street
Number

Street
Name

Street
Type

Suburb

State

Postcode

make the following declaration under the Statutory Declarations Act (Cth) 1959:

I am currently licensed for the following occupation (licence types) and seek the equivalent licences in WA

Security Officer

Crowd Controller

Security Installer

Security Monitoring Officer

Investigator

Security Consultant

Security Bodyguard

State or Territory where current licences are held

Your interstate licences must be valid for at least one (1) month from the date you submit your application at Licensing Services. You MUST provide a copy of your current interstate licences with this application

Licence Declarations

I am not the subject of disciplinary proceedings in any State or Territory (including any preliminary investigations or action that might lead to disciplinary proceedings) in relation to the occupations (licences) described above

My registration (licences) in any State or Territory is not cancelled or currently suspended as a result of disciplinary action

I am not otherwise personally prohibited from carrying on any such occupation (licences) in any State or Territory

I am not subject to any special conditions in carrying on any of those occupations (licences), as a result of criminal, civil or disciplinary proceedings in any State or Territory

List any special conditions you are subject to in carrying on your current occupation (licences):

State/Territory

Special Conditions

I give consent to the making of inquiries of, and the exchange of information with, the authorities of any State or Territory regarding my activities in the relevant occupation or occupations or otherwise regarding matters relevant to this notice



Mutual Recognition Statutory Declaration (Western Australia) Act 2001

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Personal Declaration

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 in every particular.

I certify that the information contained in this application has been provided by myself and is true and correct in every particular and that I completed this application myself. I am aware that it is an offence under Section 51 of the Security and Related Activities (Control) Act 1996 to provide false or misleading information.

Declared
at location

Applicant's
Signature

Date

In the presence of

The person before whom the declaration is made is required to state their full name, qualification and address (in printed letters)

Full Name

Qualification

Address

Witness
Signature

Date

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 Declaration Act 1959.



WA Security Industry Code of Conduct

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WA Security Industry Code of Conduct

This Code of Conduct is formulated under the provisions of Section 94 of the *Security and Related Activities (Control) Act 1996* and complies with Regulation 54A of the *Security and Related Activities (Control) Regulations 1997*.

The Code outlines the responsibilities for ALL licensees carrying out tasks relating to the provision of supplying, consultation, installation and management of security services in Western Australia. This Code of Conduct will:

- Promote consumer and community confidence;
- Improve the safety of the community and employees;
- Promote ethical and professional conduct;
- Ensure that operators comply with applicable Federal and Western Australian legislation, in particular the *Security and Related Activities (Control) Act 1996* and the *Security and Related Activities (Control) Regulations 1997*.

Professional Code of Conduct

Minimum Standards of the Professional Code of Conduct

Persons engaged in the provision of security or related services as detailed above shall:

- **Conduct their professional activities with respect to and promotion of the public interest;**
- **At all times act with integrity in their dealings with the regulatory authority, clients, suppliers, employees, fellow licence holders and the general public;**
- **Not intentionally disseminate false or misleading information, whether written, spoken or implied, nor conceal any relevant fact;**
- **Maintain truth, accuracy and good taste in advertising and sales promotion;**
- **Not represent conflicting or competing interests without the express consent of those concerned and only after full disclosure of all relevant facts to all interested parties;**
- **Refrain from knowingly associating with any organisation or industry participants who use unethical, improper or illegal methods for obtaining business;**
- **Not intentionally injure the professional reputation or practice of another person;**
- **In the event that evidence is obtained relating to another licensed person being guilty of unethical practices or non compliance with the requirements of the Act or Regulations, inform either the Regulator and/or Security Industry Association of which they are a member.**

Declaration

I undertake to contribute to the body of knowledge for improvement of the profession by exchanging information and experience with industry participants.

I acknowledge, any breach of this Code may result in disciplinary action in accordance with section 67(1a) (d) of the *Security and Related Activities (Control) Act 1996*.

Applicant's Full Name

Applicant's
Signature

Date