Introduction Agents

Form 1



Application for an introduction agents licence

Introduction Agents Act 2001
This form is effective from 1 July 2022

ABN: 13 846 673 994

Date received	
Pay	ment details
Amo	ount allocated
\$	
CHC	amount
\$	
Tota	ıl amount
\$	
Ent	ity
	ty number

Instructions

This licence is required by individuals, groups of individuals or corporations who wish to carry on business as an introduction agent.

Please complete in **BLOCK** letters. Attach extra pages if needed. All references to dates should be in DD/MM/YYYY.

Privacy statement—please read

The Office of Fair Trading (OFT) collects information, including personal information, on this form as required by the *Introduction Agents Act 2001* to process your application. In accordance with this Act, some personal information may be passed on to police services in Australia (including federal, states and territories) for criminal history searches. Enquiries may also be made with the Department of Home Affairs to verify eligibility to work in Australia. Your name, business address, business information and postal address will be placed on a register which may be inspected by the public upon payment of a prescribed fee. Additionally, information on this form can be disclosed without your consent where authorised or required by law. Under the *Fair Trading Act 1989* information may also be shared on a confidential basis with other Australian fair trading agencies.

If you give the OFT an email address to communicate with you, the personal information in these communications will be stored on your email service provider's servers. These servers may be outside of Australia. By giving us your email address, you are consenting to the personal information contained within the emails to and from the OFT to be transferred outside Australia.

Licence fees

To find the fees for your licence, visit <u>www.publications.qld.gov.au/dataset/office-of-fair-trading-feeschedule</u>. No GST is payable on the licence fees.

Each person associated with the licence e.g. associated persons/partners/directors must pass a mandatory criminal history check. A criminal history check fee applies for each person whose name and date of birth appears on this form.

Name of applicant	
	Name of applicant

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Part 1—Application detai	ls
Section 1	How do you intend to carry on business?
Business particulars	Individual Partnership Corporation
	Term of licence:
	One year Two years Three years
Section 2 Individual	Preferred title Mr Mrs Ms Other (specify)
If you are trading as a partnership/group of	Surname
individuals, please refer to	Given names
Part 3 of the application.	Have you ever been known by any other names?
	No Yes—Give other names
Section 3 Corporation details	Australian Company Number (ACN)
(if applicable)	Corporation name
	If trading as a corporation please show the full name as listed on the Certificate of Registration of a Company.
Section 4 Business name details	Full business/trading name
(If applicable)	Please show the full name as listed on the <i>Record of Registration for Business Name</i> .
Part 2—Business location	n
Section 1 Physical business address	Address (not a PO Box)
Please copy for each additional business location.	Suburb State Postcode Postcode
Section 2 Business postal address	Postal address
	Suburb State Postcode Postcode
Section 3	Phone () Fax ()
Business contact details	Mobile
	Email
	Web address
	Preferred contact method? Phone Fax Mobile Email

Part 3—Individuals, partnerships/groups of individuals, corporation officers, associated persons—personal details

If you are lodging this application in person, you may provide an original of your birth certificate/extract, Australian citizenship certificate, ImmiCard, passport or driver's licence which will be copied and certified by the officer receiving your application. If you are lodging this application by mail, please send a photocopy of one of the above documents certified as a true copy. This office will only accept photocopies of the documents certified by the following people: Justice of the Peace, Commissioner for Declarations, barrister/solicitor; or Notary Public.

Note: You must supply certified identification in your current name.

Note: You must supply certified identification in your current fiame.		
Person 1 Personal details	Position held Individual Associated person Corporation officer	
Please provide full name of	Other (specify)	
each individual involved in the business.	Preferred title Mr Mrs Ms Other (specify)	
Each individual/partner and/	First name Last name	
or each executive officer of the corporation must complete Part 3.	Other name	
Make as many copies of this	Reason for name change	
page as required. Please attach extra sheets if necessary.	Place of birth (town, state and country)	
extra sirects it ilecessary.	Associated persons	
	All people who are in effective control of the applicant's or licensees's business must complete the personal details—Part 3. For example, a person who is regularly or usually in charge of the business, or who directs staff in their duties or who is in a position to control or influence substantially the business.	
Postal address	Postal address	
	Suburb	
Residential address	Residential address (not a P.O. Box)	
	Suburb State Postcode Postcode	
Contact details	Phone (work) () Fax (work) ()	
	Phone (home) () Mobile	
	Email	
	Preferred contact method? Phone Fax Mobile Email Mail	
Person 2	Position held Individual Associated person Corporation officer	
Personal details Please provide full name of	Other (specify)	
each individual involved in		
the business.	Preferred title Mrs Mrs Miss Other (specify)	
If you have been known by any	First name Last name	
other name, give details and reason for name change.	Other name	
	(if applicable) D D M M Y Y Y	
	Reason for name change	
	Place of birth (town, state and country)	
Postal address	Postal address	
	Suburb State Postcode Postcode	
Residential address	Residential address (not a P.O. Box)	
	Suburb State Postcode Postcode	

Part 3—Individuals, partnerships/groups of individuals, corporation officers, associated persons—personal details continued						
Contact details	Phone (work) () Fax (work) ()					
	Phone (home) () Mobile					
	Email					
	Preferred contact method? Phone Fax Mobile	Email Mail				
Part 4—Suitability checklist						
Please tick the	Have you or any person mentioned in this application:					
appropriate box Note: the Office of Fair Trading will ask the Queensland Police Service (QPS) for a criminal	Been convicted of an offence against the <i>Introduction Agents Act 2001</i> , the <i>Fair Trading Act 1989</i> including the Australian Consumer Law (Queensland) forming part of that act or a corresponding law within the past five years?	Yes No				
history report of the applicant or a named associated person of the applicant and any executive officers of the	Breached an undertaking given to the Chief Executive under the Introduction Agents Act 2001, or the Fair Trading Act 1989 including the Australian Consumer Law (Queensland) within the past five years?	Yes No				
corporation.	For individuals, partners and/or corporation officers or associated persons- do any of the following disqualifying criteria apply to you or an associated p					
Note: 'externally administered body corporate' has the	Are you/they under 18 years of age?	Yes No				
meaning given by the Corporations Act 2001, Section 9 as follows: (a) that is being wound up	Are you/they an insolvent under administration (this includes entering into bankruptcy or a Personal Insolvency Agreement under Part X of the <i>Bankruptcy Act 1966</i> or is a party as a debtor to a debt agreement under Part IX of the <i>Bankruptcy Act 1966</i>)?	Yes No				
(b) in respect of property of which a receiver, or a	Have you/ they been convicted of a disqualifying offence within the past					
receiver and manager, has been appointed (whether or	five years? Have you/they (within the past five years) been a licensee or an approved	∟ Yes ∟ No				
not by a court) and is acting (c) that is under administration	manager under the <i>Prostitution Act 1999</i> ?	Yes No				
(d) that has executed a deed of company arrangement that has not yet terminated	Have you/they been ordered by a court not to be in any way involved in the operation of a business of an introduction agent (whether under this Act or another law), and is the order still current?	Yes No				
(e) that has entered into a compromise or	For corporations—do any of the following disqualifying criteria apply:					
arrangement with another person, the administration	Is the corporation an externally administered body corporate?	Yes No				
of which has not been concluded.	Has the corporation been ordered by a court not to be in any way involved in the operation of the business of an introduction agent (whether under the <i>Introduction Agents Act 2001</i> or another law), and is the order still current?	Yes No				
	Has the corporation been convicted of a disqualifying offence within the past five years?	Yes No				
	If the answer is YES to any of the above questions, please provide details or	n a separate sheet.				
Part 5—Checklist and dec	laration					
	Please read each statement and tick each box to ensure your application is	complete:				
	I/We have completed each part of this form honestly and correctly to the knowledge.					
	I/We have enclosed an original or certified copy of my/our proof of ident	tity as required in Part 3.				
	I/We have enclosed the application fee \$					
	Mandatory criminal history check fees for each person whose date and form. Processing of the application will not progress until this fee is paid					
	I/We have read and signed Part 6 (page 5) of the application.					

Part 6—Declaration **Declaration** It is an offence to supply incorrect or misleading information. Disclosure of previous convictions does not automatically disqualify you from holding a licence/certificate. However, failure to disclose convictions may result in your licence/certificate being cancelled and prosecution action being commenced. In submitting this application, I/we consent to a national criminal history check being conducted by the Queensland Police Service (QPS) and for QPS and other Australian police services to disclose criminal history information and any impending charges to the Office of Fair Trading. I understand any disclosures will be subject to applicable Commonwealth, state or territory legislation and/or police policy. Applicant sign here If insufficient signature blocks, please photocopy the declaration and attach to this application. Each person required to Signature Position held provide personal details Date signed $\bigcap_{n} \bigcap_{n} / \bigcap_{M} \bigcap_{M} / \bigcap_{Y} \bigcap_{Y} \bigcap_{Y} \bigcap_{Y}$ pursuant to this application Name (print) must sign and date this application (See Part 3). Position held Signature Add extra sheets if necessary. Date signed D D M M Y Y Y Name (print) Average processing times for a complete application is Signature Position held four to six weeks. Date signed D D D M M M V V V V Name (print) Processing times vary depending on volumes of Please ensure each individual, partners and/or executive officers of the corporation have signed applications on hand, seasonal the above. fluctuations, and whether you are recorded on an interstate Industry Licensing staff may contact you for further details if required. police database. Please allow at least four weeks from the date of lodgement before enquiring on the progress of an application. **Lodgement details IMPORTANT!** Please lodge the completed application, any supporting documentation and applicable fees to the Office of Fair Trading at the address below, at one of our regional offices, or at a Queensland Please make sure you: **Government Service Office.** provide all necessary By mail: information and Industry Licensing Unit, GPO Box 3111, Brisbane QLD 4001 documentation sign the application Visit www.qld.gov.au/fairtrading or call 13 QGOV (13 74 68) for information and your nearest return all pages of the Fair Trading Office or Queensland Government Service Office. application form. Refund If the application is withdrawn prior to a licence being issued or the application is refused, the department will retain a fee plus a fee for each criminal history check undertaken and refund the balance. Change of details If at any time your licence details or suitability requirements change, you must notify the Office of Fair Trading within 30 days.

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do not complete the payment section this form will be considered incomplete and may delay processing.

Payer details		
This section must be completed if payment has been made by another person on behalf of the applicant.	Name	
Payment		
Payment details	Cash—pay in person Do not send cash by mail Make money order or cheque payable to the Office of Fair Trading. A receipt will not be issued unless specifically requested.	
Debit/Credit card	OFT cannot accept debit/credit card details over the phone or email (including any attachments) in accordance with the Payment Card Industry Data Security Standard. If an email is received containing debit/credit card details, it will be deleted immediately and your application and payment will not be processed.	
Charge my:	MasterCard VISA	
Debit/Credit card number:		
Cardholder's name:		
Amount authorised:	\$ Expiry date: M M / Y Y Y Y	
Cardholder's signature:		
By post	A cheque or money order can be posted in, together with the application form. Make money order or cheque payable to the Office of Fair Trading	
In person	You can also visit a Fair Trading Office or an applicable Queensland Government Service Office to lodge this application and pay the applicable fees over the counter.	
П'	Visit www.qld.gov.au/fairtrading or call 13 QGOV (13 74 68) for your nearest Fair Trading Office or Queensland Government Service Office.	