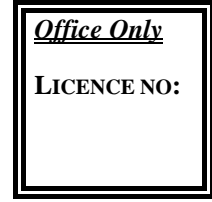


**ENERGY SAFE VICTORIA  
ELECTRICITY SAFETY (INSTALLATIONS) REGULATIONS 1999**

**APPLICATION FOR ELECTRICIAN'S LICENCE or  
SUPERVISED WORKER'S LICENCE (L)**



Fold >

**RETURN ADDRESS: LICENSING SECTION  
ENERGY SAFE VICTORIA  
PO BOX 262, COLLINS STREET WEST  
VICTORIA 8007**

Please complete this form in **BLOCK LETTERS**.

Surname of Applicant:			
Given Name(s):			
Residential Address:			
		Postcode:	
Postal Address: (if same as above, write 'AS ABOVE')			
		Postcode:	
Telephone No:	Home: ( )	Bus: ( )	
	Fax: ( )	Mobile:	
	E-mail:		

Age:		Date of Birth:	/ / 19	For identification purposes only
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**Office Use Only**

State Training Board Certificate Apprentice <input type="checkbox"/>	State Training Board Certificate <input type="checkbox"/>				
Statement of Attainment from TAFE/ Certificate III <input type="checkbox"/>	Statement of Attainment from TAFE/ Certificate III/Results <input type="checkbox"/>				
LEM Assessment <input type="checkbox"/>	Passed Practical Assessment <input type="checkbox"/>				
Letter 12 months installation work <input type="checkbox"/>	Letter 12 months installation work <input type="checkbox"/>				
Mutual Recognition <input type="checkbox"/>	TRA certificate <input type="checkbox"/>				
Grant A	Grant L				
Restrictions if any:					
Date fee paid	/ / 20	Fee paid	\$	Receipt:	
Date recommended:	/ / 20	Recommended by:			
Date approved:	/ / 20	Approved by:			

**CLASS OF LICENCE APPLIED FOR:** (Please tick (✓) appropriate box)

Electrician's Licence

Supervised Worker's Licence ( 'L' )

Do you hold or have previously held a Victorian Electrical Worker's Licence issued by Energy Safe Victoria (ESV), under the Electricity Safety (Installations) Regulations 1999?

**YES**  if YES, complete section below & proceed to question 2(a)      **NO**  if NO, proceed to question 2(a)

Licence Class:	<input type="text"/>	Licence No:	<input type="text"/>
Date of Issue:	<input type="text"/>	Date of Expiry:	<input type="text"/>

**2.**  
**a)** Do you hold a current Electrician's Licence of any grade/class in any other State or Territory of Australia or New Zealand?

**YES**  if YES, complete section below & proceed to question 2(b)      **NO**  if NO, proceed to question 2(b)

Type of Licence:	<input type="text"/>	Class:	<input type="text"/>	<i>Copy of licence card, front and back to be attached</i>
Issuing Authority:	<input type="text"/>	Licence No:	<input type="text"/>	
Date Issued:	<input type="text"/>	Date of Expiry:	<input type="text"/>	

**b)** Do you hold a current licence as an electrician or electrical fitter issued outside a State or Territory of Australia or New Zealand?

**YES**  if YES, complete section below & proceed to question 2(c)      **NO**  if NO, proceed to question 2(c)

Type of Licence:	<input type="text"/>	Class:	<input type="text"/>	<i>Please attach evidence</i>
Issuing Authority:	<input type="text"/>	Licence No:	<input type="text"/>	
Date Issued:	<input type="text"/>	Date of Expiry:	<input type="text"/>	

**c)** Do you hold an Australian Recognised Trades Certificate, granted by the Local (Electrical Trades) Committee, as an Electrical Mechanic or Electrical Fitter issued by the Commonwealth of Australia? i.e. completed your apprenticeship etc. as an Electrical Mechanic or Electrical Fitter outside a State or Territory of Australia or New Zealand.

**YES**  if YES, complete section below & proceed to question 3      **NO**  if NO, proceed to question 3

Trade Recognised:	<input type="text"/>	Date of Issue:	<input type="text"/>	<i>Please attach evidence of Trade Recognition</i>
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**3. Have you served as an apprentice in your trade?**

**YES**  if YES, complete section below

**NO**  if NO, go to question 4

Electrical Mechanic

Electrical Fitter

Other, please specify

Please attach Certificate of Apprenticeship in the trade of Electrician or equivalent

Name of Apprenticeship Employer:			
Address:			
Date commenced:		Date completed:	

Please provide a statement from your employer detailing at least 12 months experience in carrying out electrical installation work.

**4. Do you hold a Certificate III in Electrical (Electrician) or equivalent qualification?**

**YES**  if YES, please attach evidence

**NO**  if NO, go to question 5

Please attach evidence of completion or if schooling is not complete please attach school results

**5. Have you satisfactorily completed the Victorian Licensed Electrical Mechanics (LEM) assessment?**

**YES**  if YES, please attach evidence

**NO**  if NO, go to question 6

Please attach evidence of completion or if attempted and unsuccessful please attach results

**6. Give details of present and past employment in electrical work, to support this application.**

Name of Present Employer:			
Address:			
Type of work:			
Period of Employment	From: / /	To: / /	

Name of Previous Employer:			
Address:			
Type of work:			
Period of Employment	From: / /	To: / /	

(if insufficient space attach details)

7. Have you ever been refused an Electrical Worker’s Licence in Victoria or elsewhere, been disqualified from holding such a licence, or has any such licence held by you been cancelled or suspended for any period of time?

**YES**  if YES, complete section below

**NO**  if NO, go to question 8

(a) Type of Licence and Issuing Authority :

Type of Licence:		Class:	
Issuing Authority:		Lic. No.	

(b) Date of refusal, disqualification or suspension and (if applicable) the period of disqualification or suspension:


(c) Reason for refusal, disqualification, cancellation or suspension:


8. Have you ever been subject to disciplinary action taken by ESV or other Regulatory Authority relating to causes under section 34 or section 41 of the Electricity Safety Act 1998 or equivalent causes?

**YES**  if YES, complete section below

**NO**  if NO, go to question 9


9. Have you ever been convicted for failing to comply with any part of the Electricity Safety Act 1998 or the Electricity Safety (Installations) Regulations 1999?

**YES**  if YES, complete section below

**NO**  if NO, go to question 10


**10.** Have you ever been convicted of any offence involving fraud, dishonesty, drug trafficking or violence that was punishable by imprisonment for 6 months or more?

**YES**  if YES, complete section below

**NO**  if NO, go to question 11


**11.** Have you ever had judgement against you in any proceedings relating to fraudulent conduct, negligence or incompetence in connection with carrying out installation work?

**YES**  if YES, complete section below

**NO**  if NO, go to question 12


**12.** Do you have any physical disabilities that you believe would affect your ability to work safely as an electrical installation worker?

**YES**  if YES, complete section below

**NO**  if NO, go to question 13


**DECLARATION BY APPLICANT**

**13.** I declare that the information contained in this application or attached by me to the application is true and correct to the best of my knowledge and that I have read the ESV Privacy Statement.

Signature of applicant:	
Date:	/   /

While every effort is made by this Office to forward renewals prior to their expiry date, it is your responsibility to make sure your Licence does not expire.

**NOTE:**

**Electrician's Licence**

The Electrician's Licence entitles the holder to carry out all electrical installation work of the class prescribed in regulation 301(a).

The duration of this Licence is for a period of 5 years unless it is cancelled or suspended.

**Supervised Worker's Licence ("L")**

The Supervised Worker's Licence ("L") entitles the holder to carry out all electrical installation work of the class prescribed in regulation 301(a) under the effective supervision of a Licensed Electrician for a period not exceeding 3 years unless it is cancelled or suspended. It is not a renewable licence.

Upon receipt by this Office, your application will be assessed and you may be required to satisfactorily complete a practical examination in safely disconnecting and reconnecting electrical equipment conducted by the Office or a body approved by the Office. **Please contact the Office for the appropriate conditions and fee structure.**

**ESV PRIVACY STATEMENT**

The *Information Privacy Act 2000* requires Energy Safe Victoria (ESV) to tell you why we collect your personal information.

ESV collects information necessary to enable us to fulfil our functions under the *Electricity Safety Act 1998*, including the monitoring of compliance with the *Electricity Safety Act 1998* and the regulations made under that Act. We ask you to provide your name, address and date of birth for identification purposes. Your address is also required so that we know where to send your licence renewal form at the appropriate time.

ESV may need to disclose your personal information to third parties outside the organisation, such as contracted service providers, mail houses/printers and other government organisations.

You are entitled to ask for access to the personal information that ESV holds about you.

If you have any queries, please contact ESV Privacy Officer on (03) 9203 9700.

**NOTE: Please allow a period of up to seven working days, in order to process the application. This applies if all information forwarded is correct, if not, further delays in processing may occur.**

**INFORMATION TO BE PROVIDED WITH YOUR APPLICATION**

**Please mark the boxes to indicate that you have included all the required attachments.**

<b><u>CHECK LIST</u></b>	Please ✓ box		
	<b><u>YES</u></b>	<b><u>NO</u></b>	
Completed all details for Electrical Workers Licence.	<input type="checkbox"/>	<input type="checkbox"/>	
Attached a copy of the Registration/Licence details from Interstate if applying under Australian Mutual Recognition Act or if applying from New Zealand under Trans Tasman Mutual Recognition Act. <i>(Refer to question 2a)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Attached Australian Recognised Trades Certificate. <i>(Refer to question 2c)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Attached Certificate of Apprenticeship in the Trade of Electrician or equivalent issued by the Victorian State Training Board. <i>(Refer to question 3)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Attached a letter from your employer stating at least 12 months experience in carrying out electrical installation work. <i>(Refer to question 3)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Attached evidence of holding a Certificate III in Electrical (Electrician) or evidence from a TAFE provider (Statement of Attainment L.E.M.) that you have achieved the learning outcomes of the Licensing of Electrical Mechanics Module (LEM Module) or evidence of equivalent qualifications. <i>(Refer to question 4)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Attached evidence of having partially completed the Certificate III in Electrical (Electrician) or other equivalent qualifications. <i>(Refer to question 4)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Attached evidence of completion of the Licensed Electrical Mechanics (LEM) Assessment. <i>(Refer to question 5)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Enclosed the fee for an Electricians Licence -\$200.00 (cheque, money order or credit card details). The fee for a Supervised Worker's Licence will need to be discussed with the Office.	<input type="checkbox"/>	<input type="checkbox"/>	
Is application signed and dated? <i>(Refer to question 13)</i>	<input type="checkbox"/>	<input type="checkbox"/>	

**LICENSING OF ELECTRICAL WORKERS SCHEDULE OF FEES**

Application fee for the issue of a licence as an Electrician \$200.00  
 Application fee for the issue of a Supervised Electrical Worker’s Licence is on application (maximum 3 years).  
 Licensing fees, Registration fees and Certificates of Electrical Safety are GST Exempt.

**METHODS OF PAYMENT**

MAIL <input checked="" type="checkbox"/>	IN PERSON <input checked="" type="checkbox"/>
<ul style="list-style-type: none"> <li>• <b>Make cheque or money order payable to the</b> <i>Energy Safe Victoria</i> or</li> <li>• <b>Pay with Credit Card</b> <b>(Bankcard, Mastercard or Visa) complete details below</b></li> <li>• <b>Send application together with relevant attachments along with either a cheque, money order or credit card details to:</b> Licensing Section Energy Safe Victoria PO Box 262, Collins Street West VICTORIA 8007</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Make cheque or money order payable to the</b> <i>Energy Safe Victoria</i> or</li> <li>• <b>Pay with Credit Card</b> <b>(Bankcard, Mastercard or Visa)</b></li> <li>• <b>Present application together with relevant attachments to:</b> Licensing Section Energy Safe Victoria Level 3, Building 2 4 Riverside Quay SOUTHBANK</li> </ul>

All licensing Inquiries  
 Freecall – 1800 815 721  
 Facsimile (03) 9686 2197  
 ESV website  
[www.esv.vic.gov.au](http://www.esv.vic.gov.au)

A receipt will not be issued unless requested.

Bankcard	Mastercard	Visa	Expiry Date
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	/
Credit Card Number			
Signature	Amount Paid		
	\$		
Cardholder's Name (Block Letters)			



**Energy Safe Victoria**  
**ABN 27 462 247 657**