



CONTRACTOR REGISTRATION APPLICATION

Units 32 - 33, 12 Charlton Court, Woolner, NT 0820

PO Box 36644, Winnellie NT 0821

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CONTRACTOR DETAILS

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"/>			
DATE COMMENCED IN THE NT CONSTRUCTION INDUSTRY			<input type="text"/>
DESCRIBE THE TYPE OF WORK YOU PERFORM			
<input type="text"/>			

SERVICE DETAILS

Contractor service can only be **backdated up to 12 months** prior to the lodgement of this registration form.
 For backdated service **please provide service days broken up into 6 monthly return periods** eg 1/1/YY to 30/6/YY and 1/7/YY to 31/12/YY.

Example:

If you register on 1/12/06, you can only backdate service to 1/12/05. (ie 12 months)

DO NOT show service days within the current return period.

START DATE OF RETURN PERIOD/START DATE	END DATE OF RETURN PERIOD/CEASE DATE	DAYS
1/12/05	31/12/05	22
1/1/06	30/06/06	130
1/7/06	5/07/06	5

Contractors are entitled to be credited with one day of qualifying service if they have carried out at least 6 hours of construction work during any work shift.

BACKDATING SERVICE

START OF RETURN PERIOD	END OF RETURN PERIOD	DAYS WORKED
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Please note: You can only be credited with qualifying service days where you are engaged to carry out construction work in the Territory in the capacity of labour only contractor.
If you were employed in the capacity as an employee during this period please provide the details on the back of this form.

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="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
SA	REGISTRATION NUMBER	ACT	REGISTRATION NUMBER	QLD	REGISTRATION NUMBER
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
TAS	REGISTRATION NUMBER				
<input type="text"/>	<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 Refused BY Date SCANNED:

BACKDATED SERVICE DETAILS FOR SERVICE AS AN EMPLOYEE ONLY

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 8923 9304.

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