# AusTreat – Registration Application

|  |  |
| --- | --- |
| **Section A: General information** | |
| **Purpose of this application:** | Is to apply to become an approved treatment provider under AusTreat for one or more of the following treatment types: heat treatment (HT) methyl bromide (MB) and sulfuryl fluoride (SF).  If your company’s application is successful, your company will be listed as an ‘approved’ treatment provider on the [List of Treatment Providers.](https://www.agriculture.gov.au/biosecurity-trade/import/before/prepare/treatment-outside-australia/offshore-treatment-providers) |
| **Before applying, please read the following:** | * [AusTreat scheme document](https://www.agriculture.gov.au/biosecurity-trade/import/before/prepare/treatment-outside-australia/AusTreat) * [Treatment methodology](https://www.agriculture.gov.au/biosecurity-trade/import/arrival/treatments/treatments-fumigants) applicable to the treatment type(s) your company is applying to conduct. |
| **Your application must include:** | A completed and signed copy of this registration form.  A completed and signed copy of the treatment form(s) your company is applying for.  All supporting evidence detailed in the treatment form(s) which demonstrates your company has the necessary equipment, trained technicians, and treatment procedures to conduct safe and effective treatments.  **Note:** All forms must be completed in English and any documentation must be provided in English or accompanied with an English-translated version of the document. |
| **Submit your application via email to:** | [Offshoretreatments@aff.gov.au](mailto:Offshoretreatments@aff.gov.au)  The maximum file size per email is 15 MB. You can submit multiple emails if necessary. |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Section B: Company details** | | | | | | | | | |
| Company name:  Click or tap here to enter text. | | | | | | | | | |
| AEI (if applicable):  Click or tap here to enter text. | | | | Does your company have multiple branches under the one AEI: ​☐​ Yes ​☐​ No | | | | | |
| Company email address: Click or tap here to enter text. | | Company phone number: Click or tap here to enter text. | | | | Website (where applicable):  Click or tap here to enter text. | | | |
| Provide detailed information on any business, commercial, or other similar links or relationships your company has with any other entity involved in quarantine or pre-export biosecurity treatments. This includes, but is not limited to, entities registered under AusTreat. Specifically, include:   1. The name and nature of the relationship with each entity. 2. The specific services or treatments provided in collaboration with or by these entities. 3. Any shared resources, staff, ownership structures or facilities. 4. Any financial interests, joint ventures, or partnerships   Click or tap here to enter text. | | | | | | | | | |
| Click or tap here to enter text. | | | | | | | | | |
| Click or tap here to enter text. | | | | | | | | | |
| Click or tap here to enter text. | | | | | | | | | |
| **Section C: Company address** | | | | | | | | | |
| Physical Street Address (PO Box will not be accepted):  Click or tap here to enter text. | | | | | | | | | |
| Town/city:  Click or tap here to enter text. | State/Region:  Click or tap here to enter text. | | | | Country:  Click or tap here to enter text. | | | | Postcode:  Click or tap here to enter text. |
| **Section D: Person authorised to sign this form** | | | | | | | | | |
| Given name:  Click or tap here to enter text. | | | Family name:  Click or tap here to enter text. | | | | **Position:**  Click or tap here to enter text. | | |
| Work Phone number: Click or tap here to enter text. | | | Work mobile number: Click or tap here to enter text. | | | | Email address: Click or tap here to enter text. | | |
| **Section E: Additional company contacts** | | | | | | | | | |
| **Person 2:** | | | | | | | | | |
| Given name:  Click or tap here to enter text. | | | Family name:  Click or tap here to enter text. | | | | **Position:**  Click or tap here to enter text. | | |
| Work Phone number: Click or tap here to enter text. | | | Work mobile number: Click or tap here to enter text. | | | | Email address: Click or tap here to enter text. | | |
| **Person 3:** | | | | | | | | | |
| Given name:  Click or tap here to enter text. | | | Family name:  Click or tap here to enter text. | | | | **Position:**  Click or tap here to enter text. | | |
| Work Phone number: Click or tap here to enter text. | | | Work mobile number: Click or tap here to enter text. | | | | Email address: Click or tap here to enter text. | | |
| **Section F: Type of treatment(s)** | | | | | | | | | |
| **What types of treatments will your company conduct?**  **Heat treatment**  **Methyl bromide fumigation**  **Sulfuryl fluoride fumigation** | | | | | | | | | |
| **Section G: Privacy Notice** | | | | | | | | | |
| **Australian Department of Agriculture, Fisheries and Forestry Privacy Notice**  Personal information is described under the *Privacy Act 1988* meaning personal information or an opinion about an identified individual, or an individual who is reasonably identifiable: whether the information or opinion is true or not; and whether the information or opinion is recorded in a material form or not.  Protected information is described under the *Biosecurity Act 2015* (Act) meaning personal information, or information that is commercial-in-confidence that is obtained under or in accordance with the Act; or is derived from a record of personal information or information that is commercial-in-confidence that was made under or in accordance with the Act; or is derived from a disclosure or use of personal information, or information that is commercial-in-confidence, that was made under or in accordance with the Act.  The department may disclose personal or protected information to overseas regulatory agencies (if applicable) including but not limited to Regional Plant Protection Organisations and National Plant Protection Organisations as referred to in the International Plant Protection Convention and other persons or organisations where necessary for the purposes of administrating AusTreat.  By agreeing to be registered under AusTreat you consent to the disclosure of any personal or protected information, collected as part of AusTreat, to overseas regulatory agencies. The department has not taken steps to ensure that overseas regulatory agencies do not breach relevant legislative requirements or the Australian Privacy Principles. This means that:   * 1. the overseas regulatory agencies may not be accountable under the *Privacy Act 1988* or the *Biosecurity Act 2015*   2. you may not be able to seek redress under the *Privacy Act 1988* or the *Biosecurity Act 2015*   3. you may not be able to seek redress in the overseas jurisdiction   4. the overseas regulatory agencies may not be subject to any privacy obligations or to any principles similar to the Australian Privacy Principles.   See the department’s Privacy Policy to learn more about accessing or correcting personal information or making a complaint. Alternatively, telephone the Australian Department of Agriculture, Fisheries and Forestry on  +61 6272 3933 or email the department at [privacy@aff.gov.au](mailto:privacy@aff.gov.au). | | | | | | | | | |
| **Section H: Applicant declaration** | | | | | | | | | |
| **I declare that:**   * **The information I have provided is true and correct.** * **The company listed in Section D of this application agrees to meet the requirements of AusTreat.** * **I will notify** [Offshoretreatments@aff.gov.au](mailto:Offshoretreatments@aff.gov.au) **if any of the information contained in this application changes.** * **I have read and understood the Privacy Notice and Privacy Policy.** | | | | | | | | | |
| **Full name:**  Click or tap here to enter text. | | **Signature (type or sign your name):**  Click or tap here to enter text. | | | | | | **Date (dd/mm/yyyy):**  Click or tap here to enter text. | |