

Application for Approval to Manufacture Official Marks and Official Marking Device

ease Complete each section below (Please print)		
ECTION A	SECTION B	
ull name of applicant egistered company name or persons name in full)	Management details List persons who manage or control the day-to-day operations of the business, or a substantial part of the operations and any person who has the authority to direct such persons. Please be sure to include the person who will sign this application. (This section applies to all persons holding management positions.)	
CN : : : : : :	1. Name in full	
BN : : : : : : : :		
Iternative trading name/s if any egistered business names only)		
	Position	
	Home address	
ddress of premises where marking devices are to be		
1	State Poscode	
	Date of birth	
State Poscode		
	2. Name in full	
ostal and business address of applicant, if different om where marking devices are manufactured		
	Position	
State Poscode		
hone number	Home address	
)		
ax number		
)	State Poscode	
mail	Date and place of birth	
	/ /	

Printed June 23 EX091— 06/23 - pages 1 of 3

SECTION B (continued)	SECTION C (continued)	SECTION C (continued)	SECTION C (continued)
Management details 3. Name in full	2 Has the applicant completing this form or any person named in Section B of this application had any convictions against a law of any country other than Australia? If the answer to question 2 is "Yes", then please specify the person, offence, penalty,	If the answer to question 4 is "Yes", then please specify details of which person has been refused a licence, permit or approval to export prescribed goods, or which person has been granted a licence, permit or approval to export prescribed goods, which was revoked, suspended	6.1 Has the person completing this form, or any person listed in Section B of this application failed to pay any fee, charge, levy or penalty of that kind to the Commonwealth within 30 days after the due date for payment
Position	date and place of conviction.	or cancelled. Please provide details of that event.	If the answer to any part of question 6 is "Yes", then please specify details of which person has contravened a notice,
Home address			instruction, condition or restriction under the Export Control Act 1982, or under regulations or orders made under the Export Control Act 1982. Also detail the circumstances that surrounded that event.
State Poscode			
Date and place of birth			
/ /			
For Persons Nominated in Management Details in SECTION B 1.1 Has the person completing this form, or any person listed in Section B of this application, been convicted of any offence against any law of the Commonwealth or a State or Territory in the last 10 years? 1.2 Has the person completing this form, or any person listed in Section B of this application, in the last 10 years, been placed on a bond to be of good behaviour and/or been fined without a conviction being recorded against them? 1.3 Has the person completing this form, or any person listed in Section B of this application, to their knowledge have any charges outstanding against them? If the answer to any part of question 1 is "Yes" then please specify the person, offence, penalty, date and place of conviction.	3 Has the person completing this form, or any person listed in Section B of this application, previously made a false or misleading statement in any application made under the Export Control Act and subordinate legislation? If the answer to question 3 is "Yes", then please specify details of the person who made the false or misleading statement and describe the details thereof.	5 Has the person completing this form, or any person listed in Section B of this application, contravened any other notice, instruction, condition or restriction made under the Export Control Act and subordinate legislation? If the answer to question 5 is "Yes", then please specify details of which person has contravened a notice, instruction, condition or restriction under the Export Control Act. Also detail the circumstances that surrounded that event.	SECTION D Declaration (Before signing this declaration please ensure that you have completed each section of this application) I being the person in whose name, or being the representative of the company in whose name the approval to manufacture official marks and official marking devices is, or is sought to be, declare that I have provided the information required on this approved application form. I have read through the form, and further declare that the information provided is true, correct and complete in every particular. I am aware that giving false or misleading information is a serious offence. Printed name
	4 Has the person completing this form, or any person listed in Section B of this application, either alone or jointly with another person? (i) been refused a licence, permit or approval to export prescribed goods, or (ii) been granted a licence, permit or approval to export prescribed goods which has been revoked, suspended or cancelled?	6 Does the person completing this form, or any person listed in Section B of this application, owe to the Commonwealth any amount by way of: (i) a fee for a service performed at a registered establishment: or (iii) a charge or levy arising under a law of the Commonwealth or: (iv) a penalty for failure to pay a charge or levy arising under a law of the Commonwealth	Date / / Position held within the company

Printed June 23 EX091— 06/23 - pages 2 of 3 Printed June 23 EX091— 06/23 - pages 3 of 3