



Application to vary an approved arrangement – non-broker arrangements

Approved under section 434 of the *Biosecurity Act 2015*

Section A: General information

Purpose of this application	<p>To apply for approval for a variation to an approved arrangement site.</p> <p>This application is not to be used to notify the department of a change in physical location or legal entity, including a change in ABN.</p> <p>This application is not to be used for changes to broker arrangements.</p>
Before applying	<ul style="list-style-type: none"> • Check the BICON database for import conditions. • See approved arrangements class requirements, available on the department's website. • Read the department's fit and proper person's guidance material, available on the department's website.
Your application must include	<ul style="list-style-type: none"> <input type="checkbox"/> A completed and signed application. <input type="checkbox"/> An updated site plan, if applicable. <input type="checkbox"/> Additional information required by the class requirements that is relevant to the variation you are applying for. <input type="checkbox"/> If printing, please ensure corrections are initialed and whiteout is not used.
Submit your application to	aa.canberra@awe.gov.au
After you apply	<p>After receipt of your application you will receive an invoice with payment instructions. More information on fees and levies is available on the department's website.</p>

Section B: Applicant

1	Approved arrangements reference number
2	Legal entity name

Section C: Management

3	Declarant (authority to sign this application)		
	Title	First name	Last name
	Job title		
	Work phone	Work mobile phone	
	Work email		
4	Approved arrangements manager (person responsible for the arrangement)		
	<input type="checkbox"/> If no change		
	<input type="checkbox"/> If same as the declarant		
	Title	First name	Last name
	Job title		
	Work phone	Work mobile phone	
	Work email		
5	Approved arrangements site contact (person responsible for the site)		
	<input type="checkbox"/> If no change		
	<input type="checkbox"/> If same as the approved arrangements manager		
	Title	First name	Last name
	Job title		
	Work phone	Work mobile phone	
	Work email		

Section D: Proposed changes

Is this application to:

- add classes, go to section E

- remove classes, go to section F
- add biosecurity activities, go to section G
- remove biosecurity activities, go to section H
- vary requirements, go to section I

Please complete all sections that apply and then move onto section J.

Section E: Add classes

6	Indicate the classes you want to add
7	List any new imported commodities
8	List the mode of arrival of these commodities
9	List the proposed biosecurity activities you are applying to undertake

➔ If all changes have been recorded, go to section J.

Section F: Remove classes

10	Indicate the classes you want to remove
----	---

➔ If all changes have been recorded, go to section J.

Section G: Add biosecurity activities

11	List the proposed biosecurity activities you want to add
----	--

➔ If all changes have been recorded, go to section J.

Section H: Remove biosecurity activities

12	List the proposed biosecurity activities you want to remove
----	---

➔ If all changes have been recorded, go to section J.

Section I: Vary requirements

13	Indicate the class this variation applies to
14	List the requirements that you are proposing to vary
15	List the reasons why you are proposing to vary these requirements
16	List how you are going to meet these requirements, if applicable

➔ If all changes have been recorded, go to section J.

Section J: Fit and proper person test

17	<p>Have you, or any of the associates relevant to the operation of the proposed arrangement, been convicted of an offence against, or ordered to pay a pecuniary penalty under, any of the following Acts:</p> <p>a) <i>Biosecurity Act 2015</i> b) <i>Quarantine Act 1908</i> c) <i>Customs Act 1901</i> d) the Criminal Code or the <i>Crimes Act 1914</i>, to the extent that it relates to any Act referred to in this paragraph?</p> <p>Note: Do not include any convictions older than 10 years if:</p> <ul style="list-style-type: none"> • not sentenced to imprisonment, or • sentenced to imprisonment of no more than 30 months. <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes → Attach details of the circumstances including details of the offence, dates and associated penalties.</p>
18	<p>Is there a debt that is due and payable by you, or any of the associates relevant to the operation of the proposed arrangement, to the Commonwealth under:</p> <p>a) <i>Biosecurity Act 2015</i> b) <i>Quarantine Act 1908</i> c) <i>Customs Act 1901</i>?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes → Attach details of the current debt including reason why it is overdue.</p>
19	<p>Have you, or any of the associates relevant to the operation of the proposed arrangement, had a permit, compliance agreement, approval, arrangement or licence refused under:</p> <p>a) <i>Biosecurity Act 2015</i> b) <i>Quarantine Act 1908</i> c) <i>Customs Act 1901</i>?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes → Attach details of the circumstances including details of the refusals, dates and associated reference numbers.</p>
20	<p>Have you, or any of the associates relevant to the operation of the proposed arrangement, had a permit, compliance agreement, approval, arrangement or licence suspended, revoked or cancelled in part or in full under:</p> <p>a) <i>Biosecurity Act 2015</i> b) <i>Quarantine Act 1908</i> c) <i>Customs Act 1901</i>?</p> <p>Note: Do not include any decision to vary, suspend, revoke or cancel that was set aside on review.</p> <p><input type="checkbox"/> No</p>

	<input type="checkbox"/> Yes → Attach details of the circumstances including details of the suspensions, revocations or cancellations, dates and associated reference numbers.
21	Are there any other matters relevant to whether you are a fit and proper person to carry out biosecurity activities to manage biosecurity risk?
	<input type="checkbox"/> No
	<input type="checkbox"/> Yes → Attach details of the circumstances.

Section K: Declaration

To be submitted by the Declarant, listed in section C of this application.

Giving false or misleading information is a serious offence. You may be liable to a civil penalty for giving false and misleading information.

I declare that:

- I am the applicant/I am authorised to sign this declaration on behalf of the applicant.
- I have made reasonable enquiries in respect of the matters in this application.
- The information I have provided is true and correct to the best of my knowledge.
- I will ensure that biosecurity activities are carried out in accordance with the approved arrangement.

Signature	Date (dd/mm/yyyy)
Full name	

Section L: Privacy notice

'Personal information' means information or an opinion about an identified individual, or an individual who is reasonably identifiable. 'Personal information' that is collected under or in accordance with the *Biosecurity Act 2015* is also 'protected information' under the Biosecurity Act.

'Sensitive information' is a type of personal information and includes any information or opinion about an individual's racial or ethnic origin; political opinions; religious beliefs or affiliations; philosophical beliefs; sexual orientation or practices; membership of a political association, professional or trade association or union; or criminal record. It also includes health or genetic information about an individual and biometric information or templates.

The collection of 'protected information' including personal and commercial-in-confidence information by the Department of Agriculture and Water Resources in relation to this application is being collected under the *Biosecurity Act 2015* for the purposes of assessing your application and related purposes. If the relevant personal information requested in this application is not provided by you, the department may be unable to process your application. Information collected by the department will only be used or disclosed as authorised under the *Biosecurity Act 2015*. A person to whom protected information relates may consent to the information being disclosed for a certain purpose.

The personal information requested on this form may be disclosed to other Commonwealth agencies such as the Department of Home Affairs (DHA).

With the consent of relevant individuals or entities named in this application, the department may disclose the following information to the DHA for the purpose of DHA assessing and processing an application for the Australian Trusted Trader program and/or the Known Consignor Scheme:

- **Information about individuals in this application (personal and protected information).** This information includes personal information, as defined in the *Privacy Act 1988*, that is protected information under the *Biosecurity Act 2015*. This information may also include commercial-in-confidence information, as defined in section 15 of the Biosecurity Act, about individuals that is protected information.
- **Information about the applicant which is not personal information (entity and protected information).** This information may include commercial-in-confidence information, as defined in section 15 of the Biosecurity Act, that is protected information under the Biosecurity Act.

Note: Decisions regarding this consent provision do not impact on the assessment of this application. If consent is provided it may be withdrawn at any time by notifying the department at aa.canberra@awe.gov.au.

Consent can be given by relevant persons by completing the below declarations.

Consent to disclose personal and protected information

This application contains personal information and/or commercial-in-confidence information which constitutes protected information under the Biosecurity Act. Under subsection 588(3) of the Biosecurity Act the department may disclose protected information that relates to me with my consent.

By signing below, I provide consent for the department to disclose personal and protected information that relates to me, to DHA, for DHA to use that information for the purpose of assessing and processing an application for the Australian Trusted Trader program and/or the Known Consignor Scheme.

Signature	Declarant full name
Signature	Approved arrangements manager full name
Signature	Approved arrangements site contact full name

Consent to disclose entity information

By signing below, the named entity provides consent for the department to disclose entity information to DHA, which may include protected information under the Biosecurity Act, for the purpose of DHA assessing and processing an application for the Australian Trusted Trader program and/or the Known Consignor Scheme:

Signature	Declarant full name	Name of entity
-----------	---------------------	----------------

See our Privacy Policy webpage to learn more about accessing or correcting personal information or making a complaint. Alternatively, telephone the department on +61 2 6272 3933.