

# Application for an approved arrangement with updated class conditions

Approved under section 434 of the *Biosecurity Act 2015*

## Section A: General information

<b>Purpose of this application</b>	To apply for approval for an approved arrangement, with updated class conditions, where goods that are subject to biosecurity control may be treated or otherwise dealt with.
<b>Before applying, visit the departments website</b>	<ul style="list-style-type: none"> <li>• Check the <a href="#">BICON</a> database for import conditions.</li> <li>• See the class conditions to confirm the class/es you are applying for.</li> <li>• Read the department's fit and proper person's guidance material. <a href="https://www.awe.gov.au/biosecurity-trade/import/arrival/arrangements/fit-proper-person">https://www.awe.gov.au/biosecurity-trade/import/arrival/arrangements/fit-proper-person</a></li> <li>• Refer to the approved sites webpage to confirm if you want your approved arrangement details published.</li> <li>• An audit may be required to determine whether you comply with the class conditions relevant to this application. Please ensure that you are able to demonstrate compliance with all of the class conditions.</li> </ul>
<b>Your application must include</b>	<ul style="list-style-type: none"> <li>• A completed and signed application.</li> <li>• Class 2.4 only – magnification lamp photos and manufacturers specifications as required in Q21 of the application form.</li> </ul>
<b>Submit your application to</b>	<a href="mailto:aa.canberra@awe.gov.au">aa.canberra@awe.gov.au</a>
<b>After you apply</b>	<p>Before the delegate decides on the application of the approved arrangement, an onsite audit may be required. The department will advise where this is necessary.</p> <p>Information on fees and charges is available on the department's website.</p>

## Section B: Existing arrangement details

<b>1</b>	<b>Approved arrangement reference number</b>		
<b>2</b>	<b>Legal entity name</b> (must match name of the ACN/ABN used above)		
	<b>Australian Business Number (ABN)</b>		
	<b>Australian Company Number (ACN)</b>		
	Has the legal entity changed (name and ABN/ACN) since the details were last provided to the department?		
	<input type="checkbox"/> No	<input type="checkbox"/> Yes → Do NOT return this application form. A new approved arrangement application is required for the new legal entity entering an approved arrangement. <a href="https://awe.gov.au">Application for a change in legal entity - non-broker approved arrangement (awe.gov.au)</a>	
	Has the ACN or ABN changed since the details were last provided to the department?		
	<input type="checkbox"/> No	<input type="checkbox"/> Yes → Provide the updated ABN/ACN	
	Has the legal entity name changed since the details were last provided to the department?		
	<input type="checkbox"/> No	<input type="checkbox"/> Yes → Provide the updated legal entity name	
<b>3</b>	<b>Physical address</b>		
	Street address		
	Suburb/town/city	State	Postcode
<b>4</b>	<b>Telephone number</b>		
	Business phone	Business mobile phone	
<b>5</b>	<b>Postal address</b>		
	<input type="checkbox"/> If same as above		
	PO box/street address		
	Suburb/town/city	State	Postcode
<b>6</b>	<b>Email address</b> Note this is the email address directions are sent to.		
	Email:		
<b>7</b>	<b>Do you agree to your site details being published on the department's website?</b>		
	<input type="checkbox"/> No	<input type="checkbox"/> Yes	

## Section C: Management

<b>8</b>	<b>Declarant</b> (authority to sign this application)		
	Title	First name	Last name
	Work phone	Work mobile phone	
	Work email		
<b>9</b>	<b>Approved arrangement manager</b> (person responsible for the approved arrangement)		
	<input type="checkbox"/> If same as above		
	Title	First name	Last name
	Work phone	Work mobile phone	
Work email			
<b>10</b>	<b>Approved arrangement site contact</b> (person responsible for the site)		
	<input type="checkbox"/> If same as above		
	Title	First name	Last name
	Work phone	Work mobile phone	
Work email			

## Section D: Summary of arrangement

<b>11</b>	<b>Approved arrangement classes included in your existing approved arrangement.</b>		
	Are there any changes to the approved arrangement classes or biosecurity activities included in the approved arrangement?		
	<input type="checkbox"/> No	<input type="checkbox"/> Yes → Do NOT return this application. An application to vary an existing approved arrangement is required.	
<b>12</b>	<b>List the proposed imported commodities for each class</b> (e.g. used tyres, containerised machinery etc.)		
<b>13</b>	<b>Indicate the mode of arrival of these commodities</b>		
	<input type="checkbox"/> Air	<input type="checkbox"/> Sea	<input type="checkbox"/> Air and sea

14	<b>List the proposed biosecurity activities</b> (e.g. inspections, fumigations, in-vitro testing, bulbs for growing etc.)		
15	<b>Will fumigations be performed at the site?</b> <input type="checkbox"/> No → Go to question 16 <input checked="" type="checkbox"/> Yes → Indicate the type of fumigations that will be performed at the site (include location of fumigation area on site map)		
	<input type="checkbox"/> Methyl bromide	<input type="checkbox"/> Phosphine	<input type="checkbox"/> ETO
	<input type="checkbox"/> Sulfuryl Fluoride		
16	<b>Will washing be performed at the site?</b> <input type="checkbox"/> No → Go to question 19 <input type="checkbox"/> Yes → Indicate the type of wash facilities below (include location on site map).		
	<input type="checkbox"/> Wash bay	<input type="checkbox"/> Wash cabinet	
17	<b>How is wastewater from the biosecurity area (e.g., wash bay or cabinet) discharged or treated?</b>		
	<input type="checkbox"/> Directly to sewer	<input type="checkbox"/> Sent to holding tanks and then moved offsite for treatment/discharge	<input type="checkbox"/> Sent to holding tanks for hypochlorite treatment onsite
	<input type="checkbox"/> Other measure → provide details		
18	<b>Is recycled wastewater used for washing?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes → provide details of the recycling process and systems (tanks, filters) Note: Recycled waste water is water generated through washing activities in the wash bay or cabinet that is collected and retained in a dedicated holding tank for reuse in further wash activities.		
19	<b>Does the biosecurity area have an area for containers to be grounded for internal inspections if needed?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No → Indicate the type of equipment that can be used if an internal container inspection is needed		
	<input type="checkbox"/> Container inspection ramp	<input type="checkbox"/> Other container equipment → provide details	
20	<b>Class 2.4 only – is the biosecurity inspection area fitted with self-closing doors?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No → Indicate the equivalent measure to a self-closing door		
	<input type="checkbox"/> Air curtains	<input type="checkbox"/> Other measure → provide details	
21	<b>Class 2.4 only – do you have a magnification lamp that meets the specifications in condition 6.6?</b> <input type="checkbox"/> Yes → Provide a photo of the magnification lamp and a copy of the manufacturer's specifications with this application. <input type="checkbox"/> No → Indicate the time required to obtain a compliant magnification lamp.		
	<input type="checkbox"/> within 30 days of approval	<input type="checkbox"/> Other → provide details	

## Section E: Fit and proper person test

22	<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><b>Note:</b> Do not include any convictions older than 10 years if:</p> <ul style="list-style-type: none"> <li>not sentenced to imprisonment, or</li> <li>sentenced to imprisonment of no more than 30 months.</li> </ul> <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>
23	<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>
24	<p>Have you, or any of the associates relevant to the operation of the proposed arrangement, had a permit, compliance agreement, approval, arrangement or license 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>
25	<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><b>Note:</b> Do not include any decision to vary, suspend, revoke or cancel that was set aside on review.</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes → Attach details of the circumstances including details of the suspensions, revocations or cancellations, dates and associated reference numbers.</p>

<b>26</b>	<p><b>Are there any other matters relevant to whether you are a fit and proper person to carry out biosecurity activities to manage biosecurity risk?</b></p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes → Attach details of the circumstances.</p>
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## Section F: 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.
- I am ready for a site audit.
- 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.
- I have received, read, and understood the class conditions to which my arrangement will be subject, should the application be approved by the Director of Biosecurity.

Signature	Date (dd/mm/yyyy)
Full name	

## Section G: 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 Department of Agriculture, Water and the Environment collects your 'protected information' including personal and sensitive information in relation to this application under the *Biosecurity Act 2015* for the purposes of assessing your application and related purposes. If you fail to provide some or all of the relevant personal information requested in this application 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*.

The department may disclose your personal information 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](mailto: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's full name
Signature	Approved arrangements manager's full name
Signature	Approved arrangements site contact's 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
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See our [Privacy Policy](#) webpage to learn more about accessing or correcting personal information or making a complaint. Alternatively, email the department at [privacy@awe.gov.au](mailto:privacy@awe.gov.au).