

Reapplication for an approved arrangement

Approved under section 406 of the *Biosecurity Act 2015*

Section A: General information			
Purpose of this application	To apply for an approved arrangement, where an existing approved arrangement has an expiry date within the 12 months of the date of application.		
Potovo applying road the	This application form accepts minor changes to existing approved arrangements.		
Before applying, read the application form	Significant changes to an existing approved arrangement cannot be accepted on this form. Information is provided within the form about how to progress significant changes.		
Before applying, visit the departments website	Read the department's fit and proper person's guidance material. https://www.awe.gov.au/biosecurity-trade/import/arrival/arrangements/fit-proper person Refer to the approved sites webpage to determine if you want your approved arrangements details published.		
Before applying, ensure the site	Before the delegate decides whether to approve the arrangement, an onsite audit may be required. The department will advise if this is necessary.		
is ready for audit	To prevent delays in the application assessment process, ensure you are ready for a site audit (if required).		
Your application must include	☐ A completed and signed application form.		
Submit your application to	aa.canberra@awe.gov.au		
After you apply	The delegate will advise the outcome of the application in writing. After your application has been assessed you will receive an invoice with payment instructions. More information on fees and charges is available on the department's website.		

Section B: Existing approved arrangement details

	T			
1	Approved arrangement reference number			
2	Legal entity			
	Entity name			
	Australian Company Number	er (ACN)		
	Australian Business Number	(ABN)		
	Has the legal entity changed provided to the department		d ABN/ACN) since	e the details were last
	□ No □			cation form. A new approved
	arrangement application is required for the new legal entity entering an approved arrangement. Application for a change in legal entity -			
	non-broker approved arrangement (awe.gov.au) Has the ACN or ABN changed since the details were last provided to the department?			
	□ No	Sirice tire o	_	vide the updated ABN/ACN
		nged since		st provided to the department?
	No	igea siriee	_	vide the updated legal entity name
3	-		fes 7 Plot	vide the updated legal entity hame
3	Physical address Street address			
	Suburb	State		Postcode
	Suburb	State		Tostcouc
4	Postal address			
	Address Line 1			
	Suburb	State		Postcode
5	Telephone number			
	Business phone	Busine	ess mobile phone	
6	Email address Note: this is the	email addr	ess directions are se	nt to.
-	Email			
7	Do you agree to your appro	ved arra	ngement details l	being published on the
	department's website?			
	□ No □ Yes	5		

Section C: Current approval

8	Approved arrangement classes included in your existing approved arrangement. (refer to your current Notice of Approval for this information).					
	= =	anges to the approved arrange oproved arrangement?	ement classes or biosecurity activities			
	□ No	 No Yes → Do NOT return this application. An application to vary an existing approved arrangement is required. 				
Section	on D: Manag	ement				
9	Declarant (autho	rity to sign this application)				
	Title	First name	Last name			
	Work phone	Work mobile phone				
	Work email	Work email				
10	10 Approved arrangement manager (person to contact regarding overall concerns)					
	Title	First name	Last name			
	Work phone	Work mobile phone	Work mobile phone			
	Work email					
11	Approved arrar activities)	gement primary site contac	ct (person to contact regarding day-to-day			
	Title	First name	Last name			
	Work phone	Work mobile phone	Work mobile phone			
	Work email	-				
12	Approved arrangement site contacts (people the department can contact when the AA manager and primary site contact are unavailable). Attach a page to the application form if there is more than one site contact.					
	Title	First name	Last name			
	Work phone	Work mobile phone	Work mobile phone			
	Work email	I				

Section E: Fit and proper person test

13	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: a) Biosecurity Act 2015 b) Quarantine Act 1908 c) Customs Act 1901 d) the Criminal Code or the Crimes Act 1914, to the extent that it relates to any Act referred to in this paragraph?			
	Note: Do not include any convictions older than 10 years if: ont sentenced to imprisonment, or			
	sentenced to imprisonment of no more than 30 months.			
	No Yes → Attach details of the circumstances including details of the offence, dates and associated penalties			
14	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: a) Biosecurity Act 2015 b) Quarantine Act 1908 c) Customs Act 1901? ☐ No ☐ Yes → Attach details of the current debt including reason why it is overdue.			
15	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: a) Biosecurity Act 2015 b) Quarantine Act 1908 c) Customs Act 1901?			
	No Yes → Attach details of the circumstances including details of the refusals, dates, and associated reference numbers.			
16	Have you, or any of the associates relevant to the operation of the proposed arrangement, had a permit, compliance agreement, approval, arrangement, or license suspended, revoked, or cancelled in part or in full under: a) Biosecurity Act 2015 b) Quarantine Act 1908 c) Customs Act 1901?			
	Note: Do not include any decision to vary, suspend, revoke or cancel that was set aside on review.			
	No Yes → Attach details of the circumstances including details of the suspensions, revocations or cancellations, dates and associated reference numbers.			

17	Are there any other matters relevant to whether you are a fit and proper person to carry out biosecurity activities to manage biosecurity risk?			
		No		Yes → Attach details of the circumstances.

Section F: Declaration

To be completed by the Declarant, listed in section D 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.

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 authorized under the Biosecurity Act 2015.

The department may disclose your personal information to other Commonwealth agencies. In every case it will only be disclosed if authorized by the *Biosecurity Act 2015*.

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.

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		ı	Reapplication for all approved arrains
Signature		Declarant full name	
Signature		Approved arrangement manager full name	
Signature		Approved arrangement 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 <u>Privacy Policy</u> webpage to learn more about accessing or correcting personal information or making a complaint. Alternatively, email the department at <u>privacy@awe.gov.au</u> .			