

CONTRACTOR APPLICATION

Please complete all the relevant sections of the claim form using **BLACK INK** and write within the boxes with **CAPITAL LETTERS**.

SECTION 1 – CONTRACTOR DETAILS

Registration Number				Industry (Construction/Cleaning/Community/Security)											
Surname				Given names											
Trading Name															
Date of Birth (DD/MM/YY)				Email Address											
Mailing Address															
Suburb												State		Postcode	
Telephone				Mobile				Fax							

SECTION 2 – TYPE OF WORK YOU PERFORM

- | | | | |
|---|--|-------------------------------------|---|
| <input type="checkbox"/> Bricklayer | <input type="checkbox"/> Metal Trades | <input type="checkbox"/> Tiler | <input type="checkbox"/> Aged Care |
| <input type="checkbox"/> Carpenter/Joiner | <input type="checkbox"/> Plumber/Gasfitter | <input type="checkbox"/> Stonemason | <input type="checkbox"/> Childcare |
| <input type="checkbox"/> Concreter | <input type="checkbox"/> Plasterer | <input type="checkbox"/> Cleaning | <input type="checkbox"/> Disability Support |
| <input type="checkbox"/> Electrician | <input type="checkbox"/> Plant Operator | <input type="checkbox"/> Security | <input type="checkbox"/> Residential Care |
| <input type="checkbox"/> Other (Please Specify) _____ | | | |

SECTION 3 – PREVIOUS REGISTRATION DETAILS

Are you presently, or have you been registered as an employee with the Long Service Leave Authority?

No Yes

Is your company currently registered with the Long Service Leave Authority?

No Yes

If Yes, and you would like your Contractor and Employer registrations linked please provide your company Registration number:

SECTION 4 – INTERSTATE SERVICE (CONSTRUCTION AND CLEANING INDUSTRIES ONLY)

Are you presently registered in an interstate Long Service Leave Scheme?

No Yes

State	Registration Number	State	Registration Number
_____	_____	_____	_____

SECTION 5 – CONTRIBUTION DETAILS

From what date would you like to start making contributions? (DD/MM/YY)

SECTION 6 – DECLARATION

- I have read the Privacy Information on the back of this form
- I declare the information provided to be true and correct to the best of my knowledge

Print Name				Position			
_____				_____			
Signature							

Date (DD/MM/YY)							

YOUR PRIVACY

The Long Service Leave Authority (the '**Authority**', 'we', 'our' and 'us') is collecting personal and other information in this form to register you in the applicable portable long service leave scheme in accordance with Part 4 of the *Long Service Leave (Portable Schemes) Act 2009* (ACT) (the '**Act**'). We collect, use, disclose and manage personal information in accordance with the Territory Privacy Principles under the *Information Privacy Act 2014* (ACT).

The Authority may also collect your personal information: if you provide quarterly returns and payments to us; if (after registration) you enter your personal information via your online portal; via public sources of information to verify your business' identity; via enforcement activities; or if you communicate with us including by phone, fax, email, letter, in person or via your authorised representative.

The Authority will use your personal and other information to: enter you on the register; provide you with a certificate of registration, unique identifier, information pack, online portal access and periodic statements; collect and process your quarterly returns and levies; maintain and update the register; otherwise administer the portable long service leave scheme(s) applicable to you; communicate with you; administer the Authority's general business requirements; meet our legal and regulatory obligations, including as a Territory Authority; undertake surveys, monitoring, analysis and evaluation of the portable long service leave schemes and the Authority's performance of its functions and activities; and provide you with information about our activities, events, news and publications.

Without your personal information, we may be unable to: enter you on the register, communicate with you, answer your query, or otherwise administer the applicable portable long service leave scheme(s) as it applies to you.

The Authority may disclose your personal information to: our contracted service providers, (e.g. information communications and technology providers who help us to manage our databases and other information technology needs; auditors; actuaries; and for surveys, monitoring, analysis and evaluation purposes); reciprocal authorities (interstate agencies and bodies that are responsible for administering similar portable long service leave schemes); your authorised representative; our external advisers; and as otherwise authorised or required by law (e.g. when we remit tax on leave payments to the Australian Tax Office). The Authority does not disclose personal information to third parties outside Australia, unless required or permitted by law.

Our privacy policy (available at <http://www.actleave.act.gov.au/privacy-policy.html>) contains further information about how you can access and correct your personal information, how you can complain about a breach of your privacy, as well as further information about how we will manage your personal information.