

Mutual Recognition (Western Australia) Act 2001

NOTICE FOR REGISTRATION OF EQUIVALENT OCCUPATION

Mutual Recognition

The Commonwealth *Mutual Recognition Act 1992* applies in Western Australia pursuant to the provisions of the *Mutual Recognition (Western Australia) Act 2001*. The Act entitles people who are licensed or registered in any other State to also be licensed in an equivalent category in Western Australia.

How to Apply

If you are the holder of a current licence in another participating State and you wish to be licensed in Western Australia as:

- a Motor Vehicle Repairer, then you are to complete and lodge this '**Notice for Registration of Equivalent Occupation**' form **and** the application form for a Motor Vehicle Repairer's Certificate.
- an operator of a Motor Vehicle Repair Business then you are to complete and lodge this '**Notice for Registration of Equivalent Occupation**' form **and** the application form for a Motor Vehicle Repair Business.
- a Motor Vehicle Repairer **and** the operator of a Motor Vehicle Repair Business then you are to complete and lodge this '**Notice for Registration of Equivalent Occupation**' form **and** the application form for a Motor Vehicle Repairer's Certificate **and** the application form for a Motor Vehicle Repair Business.

What happens once the Notice is lodged

As soon as the 'Notice for Registration of Equivalent Occupation' is filed, you have what is called 'deemed registration'.

Upon receipt of your notice for registration the Commissioner for Consumer Protection (the "Commissioner") will make enquiries of your licensing history in any State in which you are substantially licensed.

The Commissioner must consider your Notice for Registration within one month and advise you whether your licence is granted, granted with conditions, refused or postponed. The Commissioner may refuse or postpone the grant of a licence for a number of reasons including where information or documentary evidence of existing licensing is false or misleading or where the licence being sought is not for an equivalent occupation.

Your rights under mutual recognition

If the Commissioner does not make a decision to grant, refuse or postpone registration within one month of lodgement of the Notice then you will be entitled to registration immediately after the expiry of that period of one month.

If the Commissioner refuses registration, postpones registration or grants registration imposing conditions with which you may feel aggrieved then you may appeal to the Commonwealth Administrative Appeals Tribunal for review of the decision.

When can you commence work

You may commence work as a Motor Vehicle Repairer or operate a Motor Vehicle Repair Business immediately upon lodgement of the 'Notice of Registration'.

Please check with the Licensing Branch for other requirements, which you may have to comply with.

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It is important to note that if the licence, which you hold in another State, is subject to any special conditions then those conditions will also apply in Western Australia.

States & Territories affected by mutual recognition

	Motor Vehicle Repairer's Certificate	Motor Vehicle Repair Business Licence
N.S.W.	Yes (C)	Yes (L)
QLD	No	No
VICTORIA	No	No
TASMANIA	No	No
S.A.	No	No
A.C.T.	No	No
N.T.	No	No

(C) = Certificate

(L) = Licence

Original certificate or licence to be submitted

An original or certified copy of the current certificate or licence (from the other State) must accompany the 'Notice for Registration of Equivalent Occupation'.

Licence fees

In Western Australia there is currently a one-off fee for a Motor Vehicle Repairer's Certificate. The Motor Vehicle Repair Business Licence is for three years. Fees are calculated on a sliding scale and the amount you pay will depend on the number staff engaged in repair work (certified or uncertified however does not include apprentices or trainees). Contact the Licensing Branch, Consumer Protection, Department of Commerce on telephone 9282 4362 or www.commerce.wa.gov.au for the current fees.

Further information

If you have any questions regarding mutual recognition or lodgement of notices for registration, please contact the Licensing Branch, Consumer Protection, Department of Commerce on telephone 9282 4362, email licensingenquiries@commerce.wa.gov.au or check out the website www.commerce.wa.gov.au



Complete the Mutual Recognition Application details on the following pages

MUTUAL RECOGNITION APPLICATION FORM

Mutual Recognition Act 1992 (Commonwealth)

NOTICE FOR REGISTRATION OF EQUIVALENT OCCUPATION

1. DETAILS OF APPLICANT

Surname			
Given names			
Date of Birth		Country of Birth	
Residential address			
State		Post code	
Email Address			
Telephone number		Mobile number	

2. REQUEST FOR MUTUAL RECOGNITION

I give notice for the purpose of seeking to obtain a
Motor Vehicle Repairers Certificate / Motor Vehicle Repair Business Licence [*]

with the Mutual Recognition principle as a
Motor Vehicle Repairer / Operator of a Motor Vehicle Repair Business [*]

for the purpose of the *Motor Vehicle Repairers Act 2003*.

* Cross out which is **not** applicable.

3. DETAILS OF CURRENT EQUIVALENT LICENCE OR REGISTRATION

Specify all the States in which you currently hold, or previously held, a licence or registration for this occupation.

State / Territory	Occupation Licence / Registration	Licence Number / Registration Number	Current (Yes / No)

4. CONDITIONS OF CURRENT LICENCE OR REGISTRATION

Are there any special conditions which apply to your licence or registration? [] Yes [] No

If **yes**, please give details.

.....
.....

MUTUAL RECOGNITION APPLICATION FORM

5. DECLARATION

In relation to the occupation for which a licence / registration is sought

I declare that:

- a) I am *licensed / registered* for the occupation listed in question 3 above.
- b) I am seeking to be *licensed / registered* in accordance with the principles of mutual recognition.
- c) I have specified in question 3 above all of the States and Territories in which I hold a *licence / registration* which is equivalent to the Western Australian *licence / registration*.
- d) I am not the subject of disciplinary proceedings, including preliminary investigations or action that may lead to disciplinary proceedings in relation to the occupation listed in question 3 above, in any State or Territory.
- e) My *licence / registration* for the occupation listed in question 3 above is not cancelled or currently suspended as a result of disciplinary action.
- f) I am not otherwise personally prohibited from carrying on the occupation listed in question 3 in any State or Territory.
- g) I am not subject to any special conditions in carrying on the occupation listed in question 3 in any State or Territory, as a result of criminal, civil or disciplinary proceedings.
- h) I have specified in question 4 above any special conditions to which I am subject in carrying on the occupation listed in question 3 above in any State or Territory.
- i) I consent to the making of inquiries of and exchange of information with, the authorities of any State or Territory regarding my activities in the occupations listed in question 3 above and otherwise regarding matters relevant to my notice.

Signature Date

AUTHORISATION TO COMMISSIONER

AUTHORISATION TO THE COMMISSIONER FOR CONSUMER PROTECTION

In order to assist the Commissioner with assessment of this application, I give authorisation to the Commissioner, or person(s) they direct, to make such further enquiries as he or she deems necessary, to obtain:

- (a) verification of my qualifications from the training organisation, within Australia or New Zealand, that has granted the qualification;
- (b) copies of any court transcript or records for proceedings to which I or an associated entity, have been a party;
- (c) copies of any decision in proceedings before any Board to which I, or an associated entity, have been a party;
- (d) copies of any other document or file relating to another occupational licence that I have held or for which I, or an associated entity, have applied; and/or
- (e) any other document or file that may be necessary to assist the Commissioner with assessment of this application.

I further agree to provide any additional information requested by the Commissioner and acknowledge that the Commissioner can use any or all of the information or documentation he or she receives pursuant to this authority for the purpose of assessing my application.

Full Name:

Signature:

Date:

STATUTORY DECLARATION

WESTERN AUSTRALIA - OATHS, AFFIDAVITS AND STATUTORY DECLARATIONS ACT 2005 STATUTORY DECLARATION

I, (Full name)

of (Address)

Occupation

sincerely declare that the statements and information provided in my application are correct to the best of my knowledge and belief.

This declaration is true and I know that it is an offence to make a declaration knowing that it is false in a material particular.

This declaration is made under the *Oaths, Affidavits and Statutory Declarations Act 2005*

at (place)

..... (date)

in the presence of -

.....
(Signature of authorised witness)

.....
(Print name of authorised witness Qualification as such a witness *)

By
(Signature of person making the declaration)

***Important This Declaration must be made before any of the following persons:-**

Academic (post-secondary institution), Accountant, Architect, Australian Consular Officer, Australian Diplomatic Officer, Bailiff, Bank Manager, Chartered Secretary, Chemist, Chiropractor, Company Auditor or Liquidator, Court Officer (Judge, Magistrate, Registrar or Clerk), Defence Force Officer (Commissioned, Warrant or NCO with 5 years continuous service), Dentist, Doctor, Engineer, Industrial Organisation Secretary, Insurance Broker, Justice of the Peace, Lawyer, Local Government CEO or Deputy CEO, Local Government Councillor, Loss Adjuster, Marriage Celebrant, Member of Parliament (State or Commonwealth), Minister of Religion, Nurse, Optometrist, Patent Attorney, Physiotherapist, Podiatrist, Police Officer, Post Officer Manager, Psychologist, Public Notary, Public Servant (State or Commonwealth), Real Estate Agent, Settlement Agent, Sheriff or Deputy Sheriff, Surveyor, Teacher, Tribunal Officer, Veterinary Surgeon
OR Any person before whom, under the *Statutory Declarations Act 1959* of the Commonwealth, a Statutory Declaration may be made.

LODGING YOUR APPLICATION

You may lodge this application:

By post addressed to:

The Licensing Officer
Consumer Protection
Locked Bag 14
Cloisters Square
PERTH WA 6850

In person at:

Department of Commerce
Consumer Protection
Unit 4 / 321 Selby Street (rear)
OSBORNE PARK

In person at:

Department of Commerce
Consumer Protection
Ground Floor
219 St Georges Terrace
PERTH



Department of Commerce
Consumer Protection