



APPLICATION FOR REPLACEMENT CARD



Personal Details

Full Name

Print your full name in the order you wish it to appear on your card.
Please underline your family name for our records

Mr Mrs Ms Miss

Permanent Address (for contact)

Number	Street
Suburb	
State	
Postcode	Country

Telephone Numbers (for contact if necessary)

Home	Other
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Number	Street
Suburb	
State	
Postcode	Country

Employer Details

Employer

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Number	Street
Suburb	
State	
Postcode	Country

Postal Details:

**The Australian Refrigeration Council
Locked Bag 3033
Box Hill Victoria 3128**

Particulars of Lost Licence card

Licence No

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Details of how, when and where licence card was lost or destroyed

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Action taken to recover licence card and authorities (police etc) notified

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Declaration

WARNING: Giving false or misleading information is a serious criminal offence.

I,.....
Declare that the information provided on this form is true and correct in every particular and that should the licence card declared to be lost or destroyed be ever found, I shall immediately forward it to the Australian Refrigeration Council Ltd Melbourne

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Signature of Applicant