



Australian Government

National Environmental
Protection Agency

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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Email address

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Employer Details

Employer

Number	Street
Suburb	
State	
Postcode	Country

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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Australian Refrigeration Council
Locked Bag 3033, Box Hill VIC 3128
enquire@arctick.org

Declaration:

- I declare that the above information is true in every particular. I understand that there are severe penalties for providing false and misleading information.
- I understand that my personal information provided in this application, may be released to state and territory and/or Commonwealth government agencies for the purposes of determining my suitability to hold a licence.

Signature of Applicant

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Date

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Signature of Witness

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Date

/	/
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Name of Witness

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