



DEPARTMENT OF ENVIRONMENT

Checklist for ODS Applications

Application for License to Handle Controlled substances [Methyl bromide]

| No. | Requirements (supporting documentation) | Tick or NA | |
|-----|---|--------------------------|--------------------------|
| | | Applicant | Official Use |
| 1. | Contact the Department of Environment [Ozone Depleting Substances (ODS) Unit] prior to preparation of information (this could include a telephone discussion or meeting with the Unit). i. Discuss your plans to see which activities require a license. ii. What restrictions may apply in terms of complying with the application requirements? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. | Documents to be submitted are as follows: i. Completed Application form (Form 1) ii. 1 x recent passport-sized photo iii. Accreditation Certificate (AFAS) iv. Work Reference (1 year of fumigation experience) v. Copy of the Birth Certificate vi. Copy of the TIN letter | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. | Fee for application lodgment (\$100) | <input type="checkbox"/> | <input type="checkbox"/> |

I, _____, hereby certify that I have paid the necessary application fees and that I have received/ not received the payment receipt (in the instance of not receiving a receipt, I agree to collect the receipt with the processed license or earlier, as per the advice from the Department).

For official purposes only

Application received by:

Name of Receiving Officer: _____

Signature

Date

Comments: _____