

How to Complete Application Form

- Perishable 1080* Pest Animal Baits[#]

* 1080 is a derivative of FLUOROACETIC ACID and is the common name for sodium fluoroacetate and sodium monofluoroacetate

Baits prepared under APVMA Permit Number 8781

The following information is to be inserted in the corresponding section of the application form:

1. **Full Name of Applicant:** The full name of the legal entity applying for the licence. (Eg. The name of the company or incorporated body (for a corporate entity) or the full name of the proprietor or of all partners where a business is not incorporated).
2. **Business Name of Applicant:** The registered business name, if any.
3. **Business Address of Applicant:** The business address or the address of the registered office of an incorporated body.
4. Telephone and Facsimile Number: Of the business address.
5. **Postal Address for Correspondence:** Your preferred mailing address.
6. **Address of the premises to which this application relates:** The address of the location where the poisons are to be sold, stored or used. If more than one location is involved, a separate application may be required for each location.
7. Telephone and Facsimile Number: Of the premises to which the application relates.
8. An indication of whether / when the premises will be **ready for inspection**.
9. Details of personnel who will manufacture perishable 1080 pest animal baits **or** details of APVMA registered 1080 aqueous solution (if applicant is the sponsor of that product).
10. Guilty Findings: Full and frank disclosure of any guilty findings is required.
11. **Application by an Incorporated Body:** To be completed by an authorised officer of the company. If the applicant is not incorporated, mark this section "not applicable"
12. **Declaration by the Person Completing the Application:** To be completed and signed in the presence of a witness.

Before your application can be processed, the following **must** be completed and submitted:

- Licence application form (*completed in all detail*)
- Poisons Control Plan (*completed in all relevant detail*)
- Application to Nominate a Responsible Person (*completed in all detail*)

Copies of the following documents are also required (where applicable):

- Certificate of incorporation (where the applicant is a corporate entity)
- List of all directors (of the corporate entity)
- Certificate of registration of business name (where applicable)

The prescribed fee **must** accompany every application (*see table of fees – GST does not apply*) and should be forwarded, with ALL required documents to:

MANAGER DRUGS AND POISONS REGULATION GROUP
DEPARTMENT OF HUMAN SERVICES
GPO BOX 4057
MELBOURNE 3001

For more information, phone 1300 364 545