



Application to **AMEND** or **REPLACE a TATTOOIST LICENCE**

under the Tattoo Industry Act 2012

OFFICE USE ONLY									
Application No:		-							
Trim No:									

NOTE

All documentation accompanying your application that displays your name must show your name written and spelt in exactly the same way (unless you provide acceptable documentary evidence of a change of name).

CURRENT TATTOOIST LICENCE DETAILS		
Provide your Tattooist licence details as currently held by the Securi LICENCE NUMBER EXPIRY DATE CONTROL LAST NAME		ctorate.
DATE OF BIRTH		
REASON FOR APPLICATION		
Change of Address and/or Contact Details No Change of other Personal Details No	\$55 - Go to section 3.1 Fee - Go to section 3.2 Fee - Go to section 3.3 \$\$55 - Go to section 4.1	
CHANGE OF NAME, ADDRESS OR CONTACT D	ETAILS	
Change of Name		
Provide the full last name and any given name(s) by which you are N change of name document with your application LAST NAME	· · · · · · · ·	inal certified copy of an acceptab
Provide the full last name and any given name(s) by which you are N change of name document with your application	IOW known and provide an orig	inal certified copy of an acceptab
Provide the full last name and any given name(s) by which you are N change of name document with your application	GIVEN NAME(S)	
Provide the full last name and any given name(s) by which you are Northange of name document with your application LAST NAME Change of Address and/or Contact Details Provide your current address and contact details. Your residential address	GIVEN NAME(S)	
Provide the full last name and any given name(s) by which you are Northange of name document with your application LAST NAME Change of Address and/or Contact Details Provide your current address and contact details. Your residential addressing the second of the sec	GIVEN NAME(S) Idress must be a street address as	a PO Box is NOT acceptable.
Provide the full last name and any given name(s) by which you are Northange of name document with your application LAST NAME Change of Address and/or Contact Details Provide your current address and contact details. Your residential address and contact details. Your residential address SUBURB/TOWN POSTAL ADDRESS	GIVEN NAME(S) Idress must be a street address as	a PO Box is NOT acceptable.
Provide the full last name and any given name(s) by which you are Northange of name document with your application LAST NAME Change of Address and/or Contact Details Provide your current address and contact details. Your residential addression and contact details.	GIVEN NAME(S) Idress must be a street address as	POSTCODE

3.3	Change of Other Personal Details. What other details do you want to change? Please specify below.						
4	REPLACE LOST, STOLEN, DESTROYED OR DAMAGED LICENCE						
4.1	I am applying for a replacement Tattooist licence card as my licence card has been: (select appropriate box)						
	Lost or Stolen						
	Destroyed or Damaged						
5	APPLICATION FEE						
5.1	If a fee is applicable, full payment MUST accompany your application. Applicable fees for FY 2023-2024 are shown in Section 2 of this application. Payment can be made by cheque, money order or credit card. Cheques and money orders are to be made payable to NSW Police Force. DO NOT SEND CASH.						
	Indicate your payment method.						
	Payment by: Cheque Cheque Number						
	Money Order Money Order Number						
	Credit Card ONLY MasterCard and VISA are acceptable. Credit Card payments are subject to a 0.44% merchant fee.						
	MasterCard Visa Credit Card number Expiry Date Amount \$						
	Credit Card number Expiry Date Amount \$						
	Cardholder's Name (BLOCK LETTERS) Cardholder's Signature						
6	DECLARATION AND CONSENT						
6.1	You must complete and sign the Declaration and Consent. There are severe penalties for providing information that is false and/or misleading.						
	I, (Print full name)						
	 certify that the information contained in this application is true and correct in every detail; understand that giving false or misleading information is a serious offence; 						
	 consent to the disclosure by the relevant authority of information needed to verify any details I have given in this application; 						
	 have attached all documents where requested by this application; and have attached a cheque or money order or supplied credit card details for the correct fee. 						
	SIGNATURE DATE (dd/mm/yyyy)						
7	APPLICATION CHECKLIST						
7.1	Please tick that you have:						
	Completed all relevant sections; Provided, if applicable, an original certified copy of an acceptable change of name document:						
	(Acceptable change of name documents must show a clear link between all your names and are limited to the following): • Marriage certificate(s) issued by the NSW Registry of Births, Deaths & Marriages or, if you were married elsewhere, a certified						
	copy of the marriage certificate issued by the celebrant or church						
	 Change of Name certificate issued by the NSW Registry of Births, Deaths & Marriages Full birth certificate showing your name at birth and your new name (Extracts and Commemorative certificates are NOT 						
	acceptable) • Divorce decree						
	 Deed poll registered with the relevant authority Instrument evidencing change of name registered in the Land Titles Office) 						
	instrument evidencing change of hame registered in the Land Titles Office/						

Signed the Declaration and Consent;
Attached all relevant supporting documentation – Ensure that you provide original certified copies of all documents – EACH PAGE that has been photocopied must be signed by a Justice of the Peace, Legal Practitioner or Public Notary as a true and correct copy of the original; and
Provided the correct payment.
Post the completed application form and supporting documentation (if relevant) to: Security Licensing & Enforcement Directorate NSW Police Force Locked Bag 5099 PARRAMATTA NSW 2124

IMPORTANT:

YOUR APPLICATION WILL BE DELAYED IF IT IS NOT FULLY COMPLETED AND/OR YOU HAVE NOT PROVIDED THE REQUIRED DOCUMENTATION AND FEE PAYMENT.