

APPLICATION FOR REGISTRATION OF PLANT DESIGN - CONCRETE PLACING BOOMS SafeWork SA

NEW DESIGN AND ALTERATION OF A DESIGN

Work Health and Safety Act 2012 (SA) Work Health and Safety Regulations 2012 (SA) Regulation 243 'Plant design to be registered' Enquiries 1300 365 255 Internet safework.sa.gov.au

Final licensing.safework@sa.gov.au
Post GPO Box 465, Adelaide SA 5001
ABN 50 560 588 327

For help to complete this form, please refer to the Guide For Applicants - For Plant Design Registration available at www.safework.sa.gov.au

www.sarework.sa.gov.au	
1. FORM INSTRUCTIONS	
Technical standards may be used throughout this form to identify individual plant or set plant asset plant design complies with these requirements before submitting this form to the regulator.	essment criteria. Check that the
plant design compiles with these requirements before submitting this form to the regulator.	
2. APPLICATION TYPE	
Please tick applicable box:	
New Design Alteration	
If "Alteration" please specify previous SA Registration or Approval Number:	
Please select one of the following:	
Person that designs an item of plant:	
Please tick one of the following: Designer Manufacturer	
Person with management or control of an item of plant at a workplace:	
Please tick one of the following: Manufacturer Importer Supplier	Owner
3. APPLICANT DETAILS	
Please tick if you reside outside of South Australia. Please also attach a supporting lette	r explaining circumstances to justify
the grant of registration (Section 256 of the Work Health and Safety Regulations 2012 SA).	
ABN (Australian Business Number) ACN (Australian Company Number)	
Registered name of body corporate	
Business registration (trading) name	
Name of individual applicant or contact person for body corporate:	
Family Name Given Name(s)	Title
Address Details	Postcode
Address Details	1 Ostcode
De Add Address (Dr. 1994) AND	
Postal Address (Please print 'AS ABOVE' if the same as above)	Postcode
Telephone No. Mobile No.	
Email	
4 DI ANT DEGION INFORMATION	
4. PLANT DESIGN INFORMATION Name or description of Plant (including Plant type)	Andal Number
Name or description of Plant (including Plant type) Name or description of Plant (including Plant type)	lodel Number
Month / Year of Design or Alteration	

5. REPRESENTATION DRAWING INFORMATION		
(See Part 10 Supporting Documentation for mo	ore information)	
Full Title(s)	Drawing Number(s)	Revision Number(s)
	L	
C CONCRETE DI ACINO DOOMO DETAILO		
6. CONCRETE PLACING BOOMS DETAILS Please tick applicable box:		
Type:		
Truck mounted Fixed		
Maximum boom length (m)		
Maximum delivery pressure (MPa	a)	
Maximum daliyary rata (m2/hr)		
Maximum delivery rate (m3/hr)		
7. DESIGNER'S STATEMENT / DECLARATION		
Please tick applicable box:		
submitted with this application form. The state (See Part 10 Supporting Documentation) The plant designer no longer exist or is un contact the designer and a declaration must b (See Part 10 Supporting Documentation) Business Name	able to provide a signed and dated	-
Busiless Name		
Address Details		Postcode
Address Details		Posicode
Telephone Email		
Details of published technical standards used standard unless the design is fully compliant with the standard unless the design is fully compliant with the standard unless the design is fully compliant with the standard unless		designer cannot claim compliance with a
	ne standard.	
Please tick applicable box: I used published technical standards.		
I used engineering principles in the design	: Please attach details to this applica	ation form.
(See Part 10 Supporting Documentation).		
Full Title(s)	Number(s)	Year of Publication(s)
		

7.	DESIGNER'S STATEMENT / DECLARATION (con	nt.)	
	Date when design was completed		
	Qualification(s) of Designer		
	I have complied with the designer's obligations unde design of the plant.	er Section 22 of the Work Health and Safety Act 2012 (SA) in respect	t to the
	Name of Designer	Signature of Designer Date	
8.	DETAILS OF DESIGN VERIFIER		
	ABN (Australian Business Number)	ACN (Australian Company Number)	
	Registered name of body corporate		
	Business registration (trading) name		
	Name of individual applicant or contact person for bo	ody corporate:	
	Family Name	Given Name(s)	Title
	Address details		Postcode
	Postal Address (Please print 'AS ABOVE' if the same)		Postcode
	(
	L Telephone No.	Mobile No. Facsimile No.	
	relephone No.	Mobile No.	
	Frail		
	Email		
	Qualification(s)		
0	DESIGN VERIFICATION STATEMENT		
J .	Name or description of Plant (including Plant type)	Model Number	
	Name of description of Flant (including Flant type)	Model Number	
	Downson what is not Duraning as used in this design of	unification and listed in Bort 5 on this form	
	Representational Drawings used in this design v		
	Standards and/or engineering principles used in the	-	: Dublication(s)
	Full Title(s)	Number(s) Year of	Publication(s)

	DESIGN VERIFICATION STATEMENT (cont.)				
	Design verification standards / codes				
_	Full Title(s)		Number(s)		Year of Publication(s)
Ī					
L	Design Calculations and/or other Documentation				
	Document Reference Number(s)		Document Reference Numb	er(s)	
	. ,			,	
Ļ					
_	Description of Design Alteration (if applicable)				
	Conditions imposed by Design Verifier (if any - e.g. c	lesign criter	ria, including design life)		
L	Please confirm and tick applicable box:				
ľ	I acknowledge drawings (number and revision) li	isted under	Part 5 were used by me in my	desi	gn verification.
[I have attached a separate design verification st		-		
_ _	 (See Part 10 Supporting Documentation) I declare that I was not involved in the production 	n of this do	sign: and that the design was a	orodu	and in accordance with the
	published technical standards and/or engineerin				
Г					
	I am eligible to be a design verifier for the design results of that process. I have assessed design to				
	Regulations 2012 (SA) Regulation 739)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(
	Name of Design Verifier	Signature			
		Cignataro .	of Design Verifier	_	Date
ſ		oignataro (of Design Verifier	7	Date
		Oignatar o	of Design Verifier]	Date
10. :	SUPPORTING DOCUMENTATION				Date
10. :	Please tick applicable box and attach relevant suppo]	Date
10. :		orting docun	nentation:	and al	
10. :	Please tick applicable box and attach relevant support Representational drawings (Part 5) - Must be submitted in the English language, cap Designer is located overseas (Part 7)	orting docun	nentation: ng kept in an electronic form a		information of legible size.
10. :	Please tick applicable box and attach relevant support Representational drawings (Part 5) - Must be submitted in the English language, cap Designer is located overseas (Part 7) - Must include a statement with 'I have complied	orting docun	nentation: ng kept in an electronic form a		information of legible size.
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10. :	Please tick applicable box and attach relevant support Representational drawings (Part 5) - Must be submitted in the English language, capposition Designer is located overseas (Part 7) - Must include a statement with 'I have complied Act 2012 (SA) in respect to the design of the plate. - NOTE: The statement must be in English or trace. The plant designer no longer exist or is unable. A letter detailing steps taken to contact the design of the plant'. Engineering principles used in the design (Part 9) - Must include a summary of hazards identified at the Work Health and Safety Act 2012 (SA). Design verification statement (Part 9)	orting documents of the design of the design of the lart 7) and the risk	nentation: ng kept in an electronic form a esigner's obligations under Secund signed. De English. de a signed and dated states the following declaration must be Work Health and Safety Act 2 control methods to eliminate of	ment pe cor 012 (S	information of legible size. 22 of the Work Health and Safety (Part 7) mpleted by the Importer, 'I have SA), with consideration to the imise the risks as required under
10. :	Please tick applicable box and attach relevant support Representational drawings (Part 5) - Must be submitted in the English language, capposition Designer is located overseas (Part 7) - Must include a statement with 'I have complied Act 2012 (SA) in respect to the design of the plate - NOTE: The statement must be in English or trace of the plant designer no longer exist or is unable - A letter detailing steps taken to contact the design of the plant'. The plant designer no longer exist or is unable - A letter detailing steps taken to contact the design of the plant'. Engineering principles used in the design (Part - Must include a summary of hazards identified at the Work Health and Safety Act 2012 (SA). Design verification statement (Part 9) - Must contain a description name and model of	orting documents of the design of the design of the lart 7) and the risk	nentation: ng kept in an electronic form a esigner's obligations under Secund signed. De English. de a signed and dated states the following declaration must be Work Health and Safety Act 2 control methods to eliminate of	ment pe cor 012 (S	information of legible size. 22 of the Work Health and Safety (Part 7) mpleted by the Importer, 'I have SA), with consideration to the imise the risks as required under
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IMPORTANT INFORMATION There are serious consequences for providing misleading or false information about any matter relevant to your application. If you do not provide all of the information required, your application will be returned to you unprocessed.

- I consent to SafeWork SA making enquiries and exchanging information with WHS regulators in other states, territories or the commonwealth regarding any matter relevant to this application.
- I declare that, to the best of my knowledge, the information provided in this application and supporting documentation is true and correct in every particular.
- The design of this item of plant is not currently registered with another jurisdiction operating under WHS legislation or a corresponding WHS law.

Full Name of Applicant	Signature of Applicant	Date

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12. PAYMENT OPTIONS

TAX INVOICE - PAYMENT INFORMATION APPLICATION FOR REGISTRATION OF PLANT DESIGN -**CONCRETE PLACING BOOMS**

NEW DESIGN AND ALTERATION OF A DESIGN

Work Health and Safety Act 2012 (SA) Work Health and Safety Regulations 2012 (SA)

Regulation 243 'Plant design to be registered'

SafeWork SA

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ABN 50 560 588 327

	\$145.00	(Fee current to 30 June 2024)
his fee is exempt from GST		
PPLY BY EMAIL:		APPLY BY POST:
Accepted payment type		Accepted payment types
- VISA or MasterCard (provide cardholder information b	elow)	1 - VISA or MasterCard (provide cardholder information below)
NOTE: Once your application SafeWork SA will contact you		2 - Cheque or money order (made out to SafeWork SA)
Send all documents to		Send all documents to
licensing.safework@sa.gov		SafeWork SA
(Total file size must be less th	an 20MB)	Licensing Unit GPO Box 465
		ADELAIDE SA 5001
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ostal or email address for pay	ver (receipts will be	sent to this address)
	advet the amount	1.05 B
authorise SafeWork SA to d		ils via email. Once your application has been assessed, SafeWork SA will