

Form 8: Application to Review Directive

V1-7/02



This form is for compliance with Section 103 of the *Dangerous Goods Safety Management Act 2001*

Read notes/directions prior to completion of this form – please print

Applicant's name: Mr/Ms/Mrs/Miss	
Contact name: (for a corporation)	
Mailing address:	
Contact phone number: (Work)	(Home)

Serial number of the directive you wish to be reviewed: D

Date of directive: Day Month Year

Details of the directive:

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..... (attach further pages if required)

Name of Authorised Officer who gave the directive:

Additional information to support your application: (e.g. facts incomplete, incorrect information collected)

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If your application is late, provide details explaining why it deserves consideration as a special circumstance (Section 103 of the Act requires that the application must be made to the administering executive within 14 days after the day on which the person received the directive; or within 2 months after the day, in special circumstances)

Applicant's signature:

Date: Day Month Year

Office use only		
Date application received:	/ /	14 day time limitation complied with: Yes <input type="checkbox"/> No <input type="checkbox"/>
Date application acknowledged:	/ /	
Date directive made:	/ /	
Date directive advised in writing:	/ /	

Application to Review Directive – Directions

What is this form for?

You can use this form to apply for a review of a directive, as provided for under the Dangerous Goods Safety Management Act 2001 (Sections 102 to 104).

How does a person apply for a review?

You must complete this form and give enough information to help with the review of the directive. The application must be lodged at an office of the Division of Workplace Health and Safety. There is no application fee.

When must this be done?

You must apply for a review of a directive within 14 days after the day on which the directive was received; or the longer period, within 2 months after the day, the administering executive in special circumstances allows.

What happens next?

Written confirmation of your application will be sent to you.

Your application will then be reviewed within 14 days of being confirmed. A decision will be made that either confirms or varies the original directive, or sets aside the original directive (if it is set aside, then another directive may be issued to replace it).

You will receive written confirmation of the result within 7 days after the decision has been made. This will include the reasons for the decision and explain your rights to appeal against the decision.

If your application for a review is not dealt with in the 14 days as specified, or you are not told of the review decision within the 7 days as specified, then a review decision is deemed to have been made confirming the directive.

Stay of Operation

Applying for a review of a directive does not mean the directive is stayed. However, if you have applied for a directive to be reviewed, you may also immediately apply to the Industrial Court for a stay of the directive.

Appeal to the Industrial Court

If your interests are affected by the review decision, you may appeal against the decision to the Industrial Court.

An appeal is started by:

- (a) filing notice of appeal with the registrar of the Industrial Court; and
- (b) complying with any rules of court applying to the appeal.

The notice of appeal must be filed within 28 days after:

- (a) the day you receive notice of the review decision under Section 104; or
- (b) if paragraph (a) does not apply, then the day you otherwise become aware of the review decision.

The court may at any time extend the period for filing the notice of appeal.

The notice of appeal must state fully the grounds of the appeal and the facts relied on.

Directions for completing this form:

Applicant's name.

Full name of the person or corporation applying for a review of a directive. If the applicant is a corporation, provide the name of a contact person.

Mailing address.

Full mailing address for all correspondence.

Details of the directive you wish to be reviewed.

Describe fully the directive you wish to be reviewed.

Date of directive.

Date that the directive was made.

Additional information to support your application.

Provide enough information to support your application. For example, the directive was made on incorrect facts. Include details of the special circumstances if the application is late. Ensure sufficient information is provided to allow the application to be decided.

Applicant's signature.

Check the information is complete and correct. Sign and date the form.