

Australian BORDER FORCE

Customs Act 1901 Application for Section 79 Warehouse Licence

Please open this form using Adobe Acrobat Reader. Either type in the fields provided or print this form and complete it using a pen and BLOCK LETTERS. Tick where applicable 🖌

1. Contact details for the application					
Contact person's name			Designatior	Designation	
Postal address		Suburb		State	Postcode
Email address		Contact number (busines	s hours)	Mobile number	
Email address			s nours)		
2. Client details					
Client name			ABN		
2 Establishment (Mersheuse) nome and address					
3. Establishment (Warehouse) name and address Establishment (Warehouse) name	5				
Physical site address		Suburb		State	Postcode
4. After hours contact					
After hours contact person's name					
Email address				Contact numbe	r
					•
5. After hours security					
Do you contract an after hours security company?	No Yes If	Yes, provide details.			
Company name					
Email address				Contact number	
6. Head office					
Street address		Suburb		State	Postcode
Destal address		Suburb		Chata	Destanda
Postal address				State	Postcode
7. Integrated Cargo System (ICS) Client Registra	tion				
Have you completed the ICS Client Registration process using the ABN stated above? No Yes					
Have you completed the ICS Client Registration process using the ABN stated above? No Yes					

8. Company membership and persons who participate in the management or control of the warehouse

The applicant and all persons in positions of management or control are required to be fit and proper. The ABF considers a person to be in management or control if they:

· have authority to direct operations or activities at a warehouse;

· are involved in, or have an influence over, the policies and procedures of the warehouse; or

· direct the receipt or release of goods at a warehouse.

A person is considered to be in management irrespective of whether their role is active or passive; and whether they are physically located at the warehouse.

This includes all directors, managers and customs brokers on site and includes (but not limited to) employees with:

· the authority to direct operations and/or release cargo;

· access to the ICS; or

· after hours access.

Full name	Position	Contact number	Email address	
If insufficient space, attach additional details				

9. Prior experience

No

Does the applicant or any of the persons nominated in a position of management or control have any prior experience in the operation of a licensed warehouse?

Yes If Yes, provide a brief outline (If insufficient space, attach additional details)

10. Description of goods	
Description of product	Quantity
1.	
2.	
3.	
What is the estimated maximum revenue liability for the goods that will be stored in the warehouse at any one time?	
Will the licensee be the owner of all the goods that will be stored in the warehouse?	
No If No, provide the name of the owner(s) and respective ABN(s) below Yes	

11. Warehouse activities				
List the activities you propose to undertake should the warehouse licence be approve	d (If insufficient space, attach add	ditional details)		
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
0.				
12. Storage of duty paid/free goods				
Do you wish to store duty paid/free goods within the area to be licenced?	No	Yes		
13. Duty free shops				
Are you applying for permission to operate as a duty free shop?				
No Yes If Yes, indicate the type of duty free shop you propose to operative	te			
On-Airport inwards On-Airport outwards	Off-Airport			
14. Storage of excisable goods Will you be storing excisable goods? No Yes If Yes, do you have the required licence(s) granted by the Australian Taxation Office (ATO)? No Yes No Yes Note: If you wish to store excisable goods or use imported EEGs in the manufacture of excisable goods and you are not applying for a licence as a Catering Bond, Provedore or Duty Free Shop, you will need to contact the ATO directly.				
15. Additional information for Provedores and Catering bonds				
Are you applying for permission to supply aircrafts or ships' stores to an aircraft or ver No Yes If Yes, which permission are you seeking?	ssel?			
Provedore (ships' stores) Catering Bond (aircr	afts stores)			
Will you be selling alcohol and/or tobacco as aircrafts or ships' stores?	No	Yes		
Details of the companies that will supply EEG goods to the warehouse:				
Name of company	Establishment code	ABN		
1.				
2.				
3.				
What is the quantity of product you expect to receive each year? Description of product		Quantity		
1.				
2.				
3.				
		ļ		
16. Third party entities				
Are you sharing the premises with any other third party entities? No Yes If Yes, provide details (<i>If insufficient space, attach additional details</i>)				

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17. Section 77G depot		
Will any part of the premises where the warehouse w	ill be located be licensed as a section 77G depot? No Yes	
18. Quality Management System Do you have a certified Quality Management System No Yes If Yes, state which standard you	? u are using (If insufficient space, attach additional details)	
19. Standard Operating Procedures (SOPs)		
Do you have documented SOPs in place that may be	made available upon request by the Australian Border Force (ABF)?	No Yes
20. Attachments		
All documents are mandatory for the application. Plea	ase tick each when you have attached the required document.	
Employee staff list	Warehouse site plans	ancial security
Corporate membership structure	Physical separation and construction of premises	urance
Company extract	Physical security of the premises	ty free shop standard
Financial information	Ownership / Lease verification (if a	rating procedures pplicable)
Related companies	Examination equipment	
Fit and Proper (B301) forms	Warehousing procedures and recording systems	
Asbestos Report / Occupancy Certificate	Provedore / Catering Bond Contracts (if applicable)	
 21. Declaration I declare that: I have supplied all information in the application for all the information provided above and relevant at 	rm and attachments as outlined above, and tachments in relation to this section 79 warehouse licence application a	re true and correct.
Signature	Name	Date
Privacy		
with the Australian Privacy Principles in Schedule 1 of information can be found in the Department of Home	be collected, used, stored and disclosed by the Australian Border Force of the <i>Privacy Act 1988</i> . Further information regarding how the ABF han e Affairs' (the Department) Privacy Policy www.homeaffairs.gov.au/act ntacting the Department's Privacy Help Desk by email privacy@home	dles personal cess-and-
Submitting this form		
	ts have been completed, please submit your application to:	
On receipt of your application you will be invoiced fo		
	General require further details in relation to this application. Should no receipt of this application, whether this application has been approved	