

Renewal Photocard Application

Prepare Work Zone Traffic Management Plans

This form is to apply for a renewal of a **current** (or recently expired within 3 months) Prepare a Work Zone Traffic Management Plans Photo Card & must be signed by the Applicant and Employer

1. APPLICANT DETAILS

Title

Sex

Male

Female

Family/Surname

Given Name

Middle/Other Name

Date of Birth (DD/MM/YYYY)

Contact Number

E-mail Address

RESIDENTIAL ADDRESS (Must be an address. PO Box, Locked Bag etc not acceptable)

Street number and name

Suburb

State

Post Code

POSTAL ADDRESS (if different from above)

Street Name/PO Box/GPO Box/Locked Bag/Private Bag

Suburb

State

Post Code

Return To:

Email: info@commonsense.net.au

Mail: Commonsense Safety Training, 79A Riverview Rd, Earlwood NSW 2066

Ph: 0447 679 479



2. CARD DETAILS

Prepare a Work Zone Traffic Management Plans Card Number

Expiry Date

You are required to provide a copy of your current (or recently expired within 3 months) photocard.

3. EVIDENCE OF INDUSTRY CURRENCY (this section is to be completed by the applicant)

You are required to record details as requested, in the table below and provide copies of the relevant plans/documentation.

Traffic Control Plans (TCP)/Traffic Control Guidance Schemes (TCGS):

- Provide details of three (3) Traffic Control Plans/Traffic Control Guidance Schemes that you have designed in the last 12 months.
- Attach copies of the documentation and verification that the plans were implemented.

Traffic Management Plans (TMP):

- Provide details of one (1) Traffic Management Plan that you have developed in the last 12 months.
- Attach copies of the documentation and verification that the plan has been approved by a client.
- Note: Copies of documents must be certified by a Justice of the Peace or Notary Public. Certified copies cannot be emailed.

Details to include, time, date, location, type of project, road authority ROL /permit, client where possible

TCP/TCGS 1

Details to include, time, date, location, type of project, road authority ROL /permit, client where possible

TCP/TCGS 2

Details to include, time, date, location, type of project, road authority ROL /permit, client where possible

TCP/TCGS 3

Details to include, types of project, project duration, road authority, client where possible

TMP 1

NOTE: If you are unable to provide adequate evidence of preparing work zone traffic management plans you will be required to complete a full day refresher training course with an approved training provider.

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4. APPLICANT DECLARATION

NOTE: False statements can result in substantial penalties.

By signing this form, I the applicant recorded in section 1 of this form, declare that:

- To the best of my knowledge, the information contained in this application is true and correct in every particular.
- I have presented my current (or recently expired within 3 months) traffic control photocard.
- I have maintained competency to prepare work zone traffic management plans that I am qualified for, as per section 3 of this application.
- I am aware that under 307A of the Crimes Act 1900 it is an offence to provide false, misleading or deficient information in or in connection with this application and that penalties may apply.
- To the best of my knowledge, I do not have any illness or incapacity that affects my ability to do the work for the qualification which is the subject of this application.
- If after obtaining my photocard, I develop any illness or incapacity which may affect my ability to do the work for any qualification I hold, I will cease to do the work and will advise Roads and Maritime Services Traffic Control Unit immediately.
- I am aware that the information and evidence provided in this application may be checked for authenticity and validity. This may include (but is not limited to):
 - Contacting me regarding any matter relating to this application, including validating my competency to carry out traffic controller and/or implement traffic control plans work.

If you understand and agree to the Privacy Statement and Declaration, please sign and date below.

Applicants Signature

Date

Witness Name

Date

6. LODGING THIS FORM

- You must lodge this form in its entirety with all supporting evidence in person at an RMS Approved Training Provider..
- Provide your current (or recently expired within 3 months) photocards.
- The approved training provider will obtain a current photograph.
- A fee is payable to the approved training provider.

NOTE: Service NSW is not equipped to process these applications.

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7. ATP CHECKLIST (Administration only)

Please tick if the below has been checked, verified and completed

- Application form (this form) completed
- Current (recently expired within 3 months) photocards presented
- Industry Currency section completed
- Applicant signed declaration
- 3x TCP/TCGS are attached verified with the accompanying road authority ROL/permit
- 1x TTMP attached and verified as being approved and signed by the client
- Authorised person has verified all documents, information and evidence
- Applicant meets the photocard pre-requisites
- Applicants Photograph taken
- Statement of Completion issued
- Details uploaded into Gateway System

Please tick if the applicant is an RMS employee

General Comments

Trainer/Assessor Comments

ATP representatives name

ATP representatives signature

ATP number

Date

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