

# APPLICATION FOR A SPECIAL WAGE PERMIT

[New South Wales *Industrial Relations Act 1996* - section 125]

To:

Industrial Registrar  
GPO Box 3670  
SYDNEY NSW 2001

Telephone: (02) 9258 0905  
Facsimile: (02) 9258 0058  
TTY: (02) 9258 0877

*(Please attach additional particulars if insufficient space has been provided.)*

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## APPLICANT WORKER'S PARTICULARS:

Family Name: \_\_\_\_\_ Given Names: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Applicant's authorised representative, agent or contact person for enquiries: *(if applicable)*

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Facsimile ( ) \_\_\_\_\_

*[Note: Correspondence will be sent to the workplace address unless otherwise requested]*

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**EMPLOYER'S PARTICULARS:** *(Please specify the full name(s) of the corporation, partners or sole trader that employs the applicant worker)*

Name: \_\_\_\_\_ ABN or Reg. No: \_\_\_\_\_

*(if applicable)*

Registered Business Name, if different from above: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Facsimile ( ) \_\_\_\_\_

Workplace Address: *(if different from above)* \_\_\_\_\_

Nature of employer's business: \_\_\_\_\_

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## PARTICULARS OF PROPOSED EMPLOYMENT:

Job Title and Description: *(Please set out the main duties the applicant will be performing)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Relevant Industrial Instrument (Name of Award and Award Code Number or Agreement Registration Number):** Please contact the Award Enquiry Service Centre of the Department of Commerce by telephone on 131 628 if you are unsure about which award applies. (web site: [www.industrialrelations.nsw.gov.au](http://www.industrialrelations.nsw.gov.au))  
**This section must be completed. A permit can only be issued in relation to a specific award or agreement**

Award job title/ classification: \_\_\_\_\_

Terms of engagement: \_\_\_\_\_  
(full-time, part-time, casual)

Award rate: \$ \_\_\_\_\_  
(Please specify the amount of the additional entitlement to pro rata payment in lieu of annual holiday pay, if any, that applies to employees under the relevant industrial instrument)

Proposed pay rate: \$ \_\_\_\_\_ per \_\_\_\_\_ or \_\_\_\_\_ % of relevant award rate.  
(hour/week)

Proposed hours of work: \_\_\_\_\_  
(Starting & finishing times on particular days as well as duration of any unpaid meal breaks)

Proposed duration of permit: \_\_\_\_\_

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**Grounds to support the application:** (Section 125 of the Act provides that an employee may apply to the Industrial Registrar for a permit if they consider that they are unable to earn the minimum rate set by the relevant industrial instrument because of any impairment.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**How was the proposed wage determined?** (If applicable, please attach particulars of who was involved in the wage assessment process and how it was conducted)

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I hereby apply for a permit to work under the conditions proposed above.

.....  
(Signature of applicant)

.....  
(Date)