



Australian Government

Department of Agriculture, Fisheries and Forestry
Australian Quarantine and Inspection Service

A c c r e d i t e d P e r s o n - C h a n g e o f D e t a i l s

Commencing / / , my personal details have changed. Please adjust your records accordingly.

Name:

Accreditation Number:

Previous Employer/s (if multiple, please list all):

Current Employer/s (if multiple, please list all):

Current Postal Address:

Telephone Number: [.....]

Facsimile Number: [.....].....

Email Address:

***NOTE** *I authorise the Australian Quarantine and Inspection Service ('AQIS') to use the personal information provided on this form and any information obtained relating to my accreditation to perform its quarantine and other statutory functions, and to disclose such information to State and Territory Governments, Commonwealth agencies and other third parties, including industry associations and quarantine approved places, to the extent necessary to enable those parties to assist AQIS in the administration, monitoring and management of compliance agreements and my accreditation, including the provision of training, accreditation and re-accreditation*

Signature: Date:

Please return this form by post or email to:

The National Compliance Agreement Officer
Industry Arrangements Management
AQIS
GPO Box 858
CANBERRA ACT 2601

Email: brokeraccred@aqis.gov.au (BAS)

Email: ic.ca@aqis.gov.au (Non BAS)