

A.C.N. 005 471 036 A.B.N. 40 005 471 036

To: The Safety, Rehabilitation and Compensation Commission
GPO Box 9905
CANBERRA ACT 2601

RFTS SRC Act Licence Application

Safety, Rehabilitation and Compensation Act 1988
Safety, Rehabilitation and Compensation Commission

APPLICATION FOR THE GRANTING OF LICENCE

I, Mark Parry, principal officer of Ron Finemore Transport Services Pty Ltd (RFTS), (the applicant), apply to the Safety, Rehabilitation and Compensation Commission (the Commission) for the granting of a licence to the applicant under Section 102 of the *Safety, Rehabilitation and Compensation Act 1988* (the Act).

SCOPE OF LICENCE

The applicant, RFTS, applies for a licence with the following scope:

- (a) a licence to accept liability to pay compensation and other amounts under the Act in respect of particular injury, loss or damage suffered by, or in respect of the death of, some or all employees;

AND

- (b) a licence authorising the licensee to manage some or all of the claims by employees of the licensee.

The applicant applies for a licence to apply to:

- (c) all of its employees.

CONFIDENTIAL: The contents of this memorandum and any attachments to it are confidential, may be privileged and remain the property of Ron Finemore Transport Services Pty Limited.

UNDERTAKINGS

The applicant undertakes to pay to Comcare the application fee equal to the amount estimated by the Commission to be the cost of considering the application in accordance with subsection 102(2) of the Act.

If a licence is granted to the applicant, the applicant undertakes to:

- comply with the requirements of the Act that apply to it; and
- comply with any conditions laid down in the Act and any conditions that may be determined from time to time by the Commission; and
- pay to Comcare the licence fee determined by the Commission; and
- comply with any Commission guidelines issued under the Act.

Signature of principal officer: _____


Mr Mark Parry, Managing Director
Ron Finemore Transportation Services Pty Ltd

Signature of witness: _____



Name of Witness _____

ROBYN PERKINS

Date of application: _____

27 Feb 2017

Date witnessed: _____

27 Feb 2017

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