



# High risk work licence payment request – Tax invoice

Please complete and submit to [WHS.HRW@comcare.gov.au](mailto:WHS.HRW@comcare.gov.au).

If you have any questions, please contact Comcare’s WHS Helpdesk on 1300 366 979 or by email to [WHS.Helpdesk@comcare.gov.au](mailto:WHS.Helpdesk@comcare.gov.au).

## Point of contact for this submission

Date of submission

Point of contact

Phone number  Email address

Street

Suburb  State  Postcode

Please send all licences in this submission:  To the point of contact at the above address  
 Directly to the applicant/s

## High risk work licence payment request – Tax invoice

The following fees apply per application for a HRW Licence:

- > New, Class Addition or Transfer – \$65.00 (No GST)
- > Renewal/Replacement Application – \$30.00 (No GST)

Payment will be processed once all applications in the submission have been finalised. Once the payment has been processed, Comcare will email a receipt to the point of contact and cardholder.

## Payment details

Cardholder name

Cardholder email address

Mobile phone  Work phone

Card number

Card expiry date   Visa  Mastercard

Cardholder signature  Date

Total amount \$

### Comcare use only

Natural account	4225	Account Code	4225-133-0000	Date sent to Finance	
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### Individual Applicant Details

If this is an individual submission, please place the applicant details below. If this is a bulk submission, please place details of all applicants on page 2 of this form.

#	Applicant name	Application type	Cost	RMS ref <i>(Comcare only)</i>
1				

### Bulk Submission Applicant Details

If there are multiple applicants in a submission, please list them below. If there is not enough space, please provide an additional High Risk Work Licence Payment Request – Tax Invoice.

#	Applicant name	Application type	Cost	RMS ref <i>(Comcare only)</i>
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