

**PLEASE ONLY COMPLETE THE SECTIONS THAT APPLY TO YOU**

### PART 1 - PERSONAL DETAILS

Name  Date of Birth           Worker Registration Number **W**

### PART 2 - MY CONTACT DETAILS HAVE CHANGED

Number and Street or PO Box - the address you would like mail to go to

Suburb  State    Postcode

Phone           Mobile

Email

### PART 3 - I HAVE BEEN UNABLE TO RECORD SERVICE

I was unable to work and/or record service during the 2017-2018 financial year for the following reasons:

**Tick the appropriate boxes and we will contact you for further information**

- |   |  |
|---|--|
| <input type="checkbox"/> Suffering from an illness or injury  | <input type="checkbox"/> Pregnant  |
| <input type="checkbox"/> Undertaking light duties as part of a rehabilitation program                   | <input type="checkbox"/> Receiving a Carers pension  |
| <input type="checkbox"/> Attending a training course relevant to the building and construction industry | <input type="checkbox"/> Performing 'spec' work on a residential building for the purpose of sale  |
| <input type="checkbox"/> Performing voluntary building work following a declared emergency in NSW       | <input type="checkbox"/> Performing building and construction work for a government agency and not eligible to accrue long service leave |

Dates unable to record service: from:       to:

If this period is prior to 01/07/2016 you will need to explain the reasons why you did not tell us about this missing service earlier.

### PART 4 - I HAVE BEEN WORKING INTERSTATE

- Attach a copy of your latest Annual Statement from the interstate scheme/s to preserve your record and prevent possible cancellation.

### PART 5 - I HAVE MORE THAN ONE REGISTRATION NUMBER IN NSW

As well as the number at the top right corner, I also have the following NSW worker registration numbers:

Worker Registration Number **W**           Worker Registration Number **W**           Worker Registration Number **W**

To combine your multiple registrations into one, you need to provide us with proof of your identity:

- Passport  Birth Certificate  Change of name certificate/deed poll documents (only required if you have legally changed your name)

COMPLETE SECTIONS OVER THE PAGE

**PART 6 - I HAVE SERVICE MISSING FROM WORKING ON WAGES/SALARY**

**ⓘ DO NOT COMPLETE THIS SECTION IF:**

- **You're a Self Employed Contractor, Sole Trader or in a Partnership:** You must lodge a Self Employed Worker Certificate of Service to record service. Please see your Tax Agent or call **13 14 41** for details.
- **You're a Working Director - Working on wages for your own Pty Ltd company:** Please call **13 14 41** for your legal obligations.

**EMPLOYMENT DETAILS**

Company/Business Name <input style="width: 95%;" type="text"/>	Street Address (number and street) <input style="width: 95%;" type="text"/>		
Suburb <input style="width: 95%;" type="text"/>	State <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	Postcode <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	
Contact Person <input style="width: 95%;" type="text"/>	Contact Person's Position <input style="width: 95%;" type="text"/>		
Contact Phone <input style="width: 25px;" type="text"/> <input style="width: 25px;" type="text"/> <input style="width: 25px;" type="text"/> <input style="width: 25px;" type="text"/> <input style="width: 25px;" type="text"/> <input style="width: 25px;" type="text"/> <input style="width: 25px;" type="text"/> <input style="width: 25px;" type="text"/> <input style="width: 25px;" type="text"/> <input style="width: 25px;" type="text"/> <input style="width: 25px;" type="text"/> <input style="width: 25px;" type="text"/> <input style="width: 25px;" type="text"/> <input style="width: 25px;" type="text"/> <input style="width: 25px;" type="text"/> <input style="width: 25px;" type="text"/> <input style="width: 25px;" type="text"/> <input style="width: 25px;" type="text"/> <input style="width: 25px;" type="text"/>	ABN/ACN <input style="width: 95%;" type="text"/>		

**Is the Employer still in business?**

Still trading    
  Ceased trading    
 Ceased trading date (if known):  
  / 
  /

Dates you were employed:   
 from  / 
  / 
    
 to:  / 
  /

Full-time    
  Part-time    
 If Part-time, write total number of days worked during employed period  

Award paid under (please specify full name of award or agreement - stating EBA or CFMEU is not acceptable)

Work Description (eg. Electrician/plumber/plant operator etc)

**PART 7 - DESCRIBE IN DETAIL THE WORK YOU PERFORMED ON A REGULAR WORK DAY AND THE NUMBER OF NORMAL WORKING HOURS SPENT ON EACH OF THE TASKS:**

Task 1 <input style="width: 95%; height: 20px;" type="text"/>	Hours Per Day <input style="width: 20px; height: 20px;" type="text"/>
Task 2 <input style="width: 95%; height: 20px;" type="text"/>	Hours Per Day <input style="width: 20px; height: 20px;" type="text"/>
Task 3 <input style="width: 95%; height: 20px;" type="text"/>	Hours Per Day <input style="width: 20px; height: 20px;" type="text"/>
Task 4 <input style="width: 95%; height: 20px;" type="text"/>	Hours Per Day <input style="width: 20px; height: 20px;" type="text"/>
Task 5 <input style="width: 95%; height: 20px;" type="text"/>	Hours Per Day <input style="width: 20px; height: 20px;" type="text"/>

**PART 8 - WHERE DID YOU PERFORM YOUR WORK?** (eg. onsite/workshop/office)

If you worked in more than one location, please provide an estimate of time in each. The total needs to equal 100% (eg. onsite - 30%, workshop - 30%, office - 40%).

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**PART 9 - WHAT TYPE OF CONSTRUCTION SITES DID YOU WORK ON AND WHAT WERE YOU BUILDING?**

(please provide examples)

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**! HAVE YOU ATTACHED PROOF OF EMPLOYMENT?** (Without proof of employment no further action will be taken)

**Tick the appropriate box**

Yes

- Taxation payment summary
- Certificate of Service or Centrelink employment separation certificate
- Letter of offer of employment or service reference by the employer concerned, confirming employment on wages, the type of building and construction work performed and specifying employment details
- Apprenticeship indenture papers
- Document from a superannuation scheme showing records of contributions
- Workers compensation documents
- Payslips
- Bank statements with entries of pay
- Contract of employment

**PART 10 - DECLARATION**

I declare that the information I have given in this Record Update form and accompanying documents is true and correct and that all copies of supporting documents supplied are true copies. I make this declaration with the knowledge that a false or misleading statement may result in a penalty of up to \$5,500 under the provisions of Section 58A of the Building and Construction Industry Long Service Payments Act 1986.

Name

Signature

Date

D			M			Y				
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**RETURN**

**Please complete and return before 31 May 2019 to:**

 **Scan and email** to [info@longservice.nsw.gov.au](mailto:info@longservice.nsw.gov.au) **or**  **Post** to Locked Bag 3000, Central Coast MC NSW 2252