

Form ASO214

NOTIFICATION of DESIGNATION of an INDIVIDUAL

Individual's deta	ails		
Person's title:	Person's <u>full</u> name:		
Position Title (within the company):			
Date of effect of designation:		Mobile Number:	
Phone number:		Fax Number:	
Email address:			
Contact address:			
List the sections of the permit for which this individual will carry responsibility for compliance:			
Signature and permit details			
Name :			
Position:			
Signature:		Date:/_	
Permit Holder:			Permit No:



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Explanatory Notes

Ref. No. A sequential reference number is required for each form of this type submitted by the

Permit Holder (eg, 001, 002, 003, etc). Where amendments are made to a previously submitted form, please use the same reference with a sequential revision

number (eg, 003-Rev.1).

Person's full name..... Must include all names, as they appear on your employment records

Signature This form must be signed by a representative of the Permit Holder (ie, the

organisation) who will take responsibility for, and sign documents on behalf of, the

organisation.

This form replaces the following forms →

ASO214 (Version 3 issued 5 January 2006)