



### Photographic and signature identification form

#### 1. Applicant Details

Given names		Surname	
Title	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>	Date of Birth	

#### 2. Photographic and signature identification

The *Licence as a Pest Management Technician* will display a photograph of the technician and signature in digital format. Please attach at least two (2) colour photographs that meet the specifications listed below.

**The photographs must be –**

- passport quality
- showing full front view of the applicant's head and shoulders
- not smaller than 35mm x 45mm and not larger than 40mm x 50mm
- not more than 6 months old
- good quality colour with no ink or marks on the image
- sharply focused, not blurred or unclear
- endorsed on the back of the photographs by the Identifier

**Applicant's specimen signature**

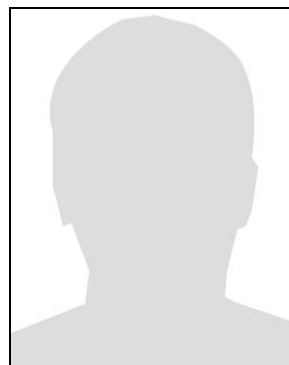
(The signature must be signed in the presence of the authorised identifier)

[		]
L		J

**Attach two (2) photographs here**

(show front of photo 1)

(show back of photo 2)



**Do not bend or staple**

Note: Authorised identifier is to sign and date the back of the photographs in ink with his /her original signature.

#### 3. Declaration by an authorised identifier

The identifier must –

- be satisfied that the photographs represent the applicant's true identity
- sign and date the back of the photographs in ink with his/her original signature
- witness the applicant signing the *Applicant's Specimen Signature* block at **section 2**
- complete their details and sign this declaration.

<input checked="" type="checkbox"/> 1 box only	<input type="checkbox"/> Justice of the Peace	<input type="checkbox"/> An officer of the Queensland public health system in either the licensing section of the Health Protection Unit or environmental health section of your local Hospital and Health Services Public Health Unit.
	<input type="checkbox"/> Commissioner for Declarations	
	<input type="checkbox"/> Police officer	
	<input type="checkbox"/> Solicitor	

I declare I am satisfied that the specimen signature and photographs described at **section 2** above represent the applicant's true signature and identity.

Full name of authorised identifier			
Signature		Date	