Declaration of Number Eligibility for registration on the Do Not Call Register

Instructions for completion

- Please print clearly. Illegible, unclear or incomplete application forms may delay processing.
- Please tick ✓ each statement that applies to the telephone or fax number/s.

Return the completed f	orm i	by:
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Post The Team Leader

Do Not Call Register

PO Box 13206 Law Courts Melbourne VIC 8010

Email Scan document/s and email to

enquiries@donotcall.gov.au

Fax 1300 793 514

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This declaration is in relation to the eligibility of the following number/s to be on the Do Not Call R	egister

Eligibility Criteria

For a number to be eligible to be registered on the Do Not Call Register, it must be:

- an Australian Number;
- used or maintained exclusively or primarily for private or domestic purposes; or
- used or maintained exclusively or primarily for transmitting and/or receiving faxes; or
- used or maintained exclusively or primarily for use by a government body; or
- an emergency services number.

Please answer the following questions as part of your declaration concerning the eligibility of your number:

1.	Is your number an Australian number?
	Yes □ No □
lf	'Yes', then proceed to question '2'. If 'No' proceed to the 'Declaration' section.
	Is your number used or maintained exclusively or primarily for private or domestic purposes? Refer to the FAQ at www.donotcall.gov.au for advice if needed. Yes No
lf '`	Yes', then proceed to the 'Declaration' section. If 'No', proceed to question '3'.
3.	Is your number used or maintained exclusively for transmitting and/or receiving faxes? Yes $\;\square\;$ No $\;\square\;$
lf '`	Yes', then proceed to the 'Declaration' section. If 'No', proceed to question '4'.
4.	Is your number used or maintained exclusively for use by a government body? Yes □ No □





	5.	Any other releva	nt considerations/comments:
De	clarati	ion	
Ιd	eclare	that the details I h	ave provided above are true and correct.
Ιa	n awa	re that under Part	7.4 of the Criminal Code, it is a serious offence to give false or misleading
inf	ormatio	on or to provide do	ocuments that are false or misleading.
ſ			
		Signature	
		Print full name	
		Date	

If 'Yes', then proceed to the 'Declaration' section.



