

*Please ensure this declaration is on company letterhead (Remove this entire line before sending through)*

Date: **INSERT DATE HERE**

Attention – City Facilities Management

We hereby declare that we have applied the relevant *Connection Test* as outlined in the linked document regarding Workers Compensation – Cross Border Arrangements.

We advise that we have no workers who either usually work in or are usually based in **INSERT RELEVANT STATE/TERRITORY** as per the guidelines.

We confirm that in the States where we subcontract work, we will ensure they are correctly licensed and insured to carry out the works they have been engaged to complete.

Regards,

*Must be signed by a director of the organisation (Remove this entire line before uploading)*

**INSERT NAME OF DIRECTOR**

EXAMPLE DOCUMENT ONLY

**Connection test links below:**

[Victorian Connection test](#)

[Tasmanian Connection Test](#)

[New South Wales Connection Test](#)

[Australian Capital Territory Connection Test](#)

[Queensland Connection Test](#)

[Northern Territory Connection Test](#)

[South Australian Connection Test](#)

[Western Australia Connection Test](#)

EXAMPLE DOCUMENT ONLY