**Registration or Removal**

**of a Linked Storage Unit**

**Release Date: July 2019**

**Introduction**

The SSBA Standards allow registered facilities to store **Tier 2 SSBAs** in a linked storage unit that is:

* Within the same building as a facility, preferably on the same floor;
* Included as part of the registration of the facility;
* Included in the risk assessment and risk management plans for the facility; and
* Fixed in place or is non-transportable.

You can only register a linked storage unit if your facility is **already registered** to handle the SSBAs to be stored in the linked storage unit. If you need to register a new facility please complete the *Initial Registration* form or if you need to register to handle a new SSBA please complete the *Start to Handle a New SSBA* form.

You must register each linked storage unit where SSBAs are stored as part of the facility’s registration.

Tier 1 SSBAs **must only** be stored within the secure perimeter of the registered facility.

This form may also be used to remove a linked storage unit from your facility registration.

**Providing information to Health**

The information you provide to Health is mandated by the *National Health Security Act 2007* and will be included on the National Register of SSBAs.

It is important to answer all questions and to provide accurate information. If the information you provide is incorrect or incomplete, Health may require you to provide additional information. This may cause delays.

**Privacy**

Personal information provided to Health is handled according to the requirements of the *Privacy Act 1988*.

**Application Authorisation**

Please ensure that the person completing this form holds the appropriate authority to submit this application on behalf of the entity or facility.

**Instructions on completing this form**

This document allows electronic entry of information into the required fields. It is recommended that, where possible, this form should be completed on a computer and a copy printed, signed and sent to Health.

All questions are mandatory and must be completed. If the space provided in each field is not sufficient to complete your answer, please include any additional information in an attachment with the information clearly marked as to which question it relates to.

Please ensure you retain a copy of this completed form as Health is unable to provide copies of submitted documents.

**Lodgement**

To lodge this form via post you will need to use an opaque envelope and post using Australia Post’s Registered Mail service. You are considered to have submitted the report at the date and time shown on the registered post receipt.

**Please do not email or fax forms to Health as these cannot be accepted.**

Please submit all postal applications to:

The Director

Health Emergency Planning, Security and Laboratories Section

Department of Health

MDP 140, GPO Box 9848

Canberra ACT 2601

Once Health has received the form, you will be provided with a confirmation of receipt by email to the contact officer listed for the facility.

**Further Information**

Please use your facility reference number to refer to any matters relating to your facility.

If you have any queries about this form please contact the SSBA Regulatory Scheme:

Telephone: (02) 6289 7477

Email: [ssba@health.gov.au](mailto:ssba@health.gov.au)

# PART 1: REGISTERED FACILITY DETAILS

*Complete the details for the entity and facility.*

|  |  |
| --- | --- |
| Facility registration number |  |
| Entity name |  |
| Facility name |  |

# PART 2: REGISTER A LINKED STORAGE FACILITY (TIER 2 SSBAs ONLY)

*Please provide the details of the facility’s linked storage unit.*

|  |  |
| --- | --- |
| **Linked Storage Unit Details 1** | |
| Storage unit name |  |
| Is this storage unit located within the same building? *Note: the storage unit must be within the same building as the registered facility and preferably on the same floor.* | Yes  🡺 move to next question  No  🡺 Please contact Health |
| Location of storage unit within the building *(e.g. room number/floor/building name)* |  |
| Has this storage unit been included in the facility’s risk assessment and management plans? | Yes  🡺 please complete questions below  No  🡺 You must include the linked storage unit in the Risk Assessment / Risk Management Plan. |
| Is the storage unit fixed and non-transportable? | Yes  🡺 please complete questions below  No  🡺 please contact Health |
| **SSBA 1 Details** | |
| Name of SSBA stored in this linked storage unit? |  |
| Is the purpose for handling the SSBA in this linked storage unit storage related?  *Please note: The purpose for handling in a linked storage unit must be storage or preparation for storage.* | Yes  🡺 please complete questions below  No  🡺 please contact Health |
| Start date of storage |  |
| **SSBA 2 Details** | |
| Name of SSBA stored in this linked storage unit? |  |
| Is the purpose for handling the SSBA in this linked storage unit storage related?  *Please note: The purpose for handling in a linked storage unit must be storage or preparation for storage.* | Yes  🡺 please complete questions below  No  🡺 please contact Health |
| Start date of storage |  |

|  |  |
| --- | --- |
| **Linked Storage Unit Details 2** | |
| Storage unit name |  |
| Is this storage unit located within the same building? *Note: the storage unit must be within the same building as the registered facility and preferably on the same floor.* | Yes  🡺 move to next question  No  🡺 Please contact health |
| Location of storage unit within the building *(e.g. room number/floor/building name)* |  |
| Has this storage unit been included in the facility’s risk assessment and management plans? | Yes  🡺 please complete questions below  No  🡺 please contact Health |
| Is the storage unit fixed and non-transportable? | Yes  🡺 please complete questions below  No  🡺 please contact Health |
| **SSBA 1 Details** | |
| Name of SSBA stored in this linked storage unit? |  |
| Is the purpose for handling the SSBA in this linked storage unit storage related?  *Please note: The purpose for handling in a linked storage unit must be storage or preparation for storage.* | Yes  🡺 please complete questions below  No  🡺 please contact Health |
| Start date of storage |  |
| **SSBA 2 Details** | |
| Name of SSBA stored in this linked storage unit? |  |
| Is the purpose for handling the SSBA in this linked storage unit storage related?  *Please note: The purpose for handling in a linked storage unit must be storage or preparation for storage.* | Yes  🡺 please complete questions below  No  🡺 please contact Health |
| Start date of storage |  |

# PART 3: REMOVAL OF A LINKED STORAGE UNIT FROM A FACILITY REGISTRATION

*Please complete this section if you would like to remove the linked storage unit from the facility registration.*

|  |  |
| --- | --- |
| **Removal of a Linked Storage Unit** | |
| Name of linked storage unit |  |
| Have you removed the entire holdings of SSBAs from the linked storage unit? | Yes  please complete the remaining question  No  you are required to continue the registration of the linked storage unit. |
| Would you like this linked storage unit to remain linked to your registered facility? | Yes  No  please be aware that if you intend to store SSBAs in this storage unit in future you will need to complete a new request to link the unit to the registered facility. |

# PART 4: SIGNATURES

The information collected on this form may be used by Health to decide whether to vary the National Register of Security Sensitive Biological Agents (National Register). If a decision is made to vary the National Register, the information contained on this form, including personal information, will be recorded on the National Register by Health.

The information collected on this form is authorised under the *National Health Security Act* *2007* and *National Health Security Regulations 2018*. Information collected on this form may be disclosed by Health to the Australian Security Intelligence Organisation, law enforcement agencies such as the Australian Federal Police and State and Territory police forces, other agencies responsible for responding to emergencies and other specified persons. Health is unlikely to disclose personal information to overseas recipients.

Health has an Australian Privacy Principles (APP) privacy policy which you can read at [www.health.gov.au/internet/main/publishing.nsf/content/privacy-policy](http://www.health.gov.au/internet/main/publishing.nsf/content/privacy-policy). You can obtain a copy of the APP privacy policy by contacting Health by telephone on (02) 6289 1555, freecall   
1800 020 103 or by using the online enquiries form at [www.health.gov.au](http://www.health.gov.au).

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The National Register is hosted and maintained by the Department of Home Affairs.

I declare that:

* I am duly authorised to sign this declaration on behalf of the entity associated with this facility;
* The information supplied on this form and any attachment is true and correct; and
* This entity is compliant with the SSBA Standards currently in force.

|  |  |
| --- | --- |
| Signature |  |
| Date |  |
| Full name (Please print) |  |
| Position title |  |
| Contact telephone number |  |
| Contact e-mail address |  |