

## Exemption A Form: Non-Brand Owner

If you have reached this webpage, your organisation has answered ‘no’ to all of the questions on the Assess Liability page and may be exempt from obligations under the National Environment Protection (Used Packaging Materials) Measure 2011 (the NEPM).

### To take action:

1. Notify APCO of this by downloading, printing and completing the “EXEMPTION A” form below.
2. Return the signed and completed form to APCO via [connect@apco.org.au](mailto:connect@apco.org.au) with the subject line ‘Exemption A’.
3. Retain a copy for your records.

### Next steps:

1. The APCO team specialists will review the completed form to confirm that your organisation is indeed exempt.
2. Your organisation will be notified of the outcome of this review via the email you provide in the form.

## COMPANY DETAILS

**Company Name** - provide the full entity name as set out within the received letter.

**Australian Business Number (ABN)** - provide the ABN of the entity listed in the received letter.

**Indicate the state or territory of your organisation’s registered address.**

**States or territory where your organisation is headquartered. Tick all that apply.**

- |                              |                          |                   |                          |
|------------------------------|--------------------------|-------------------|--------------------------|
| Australian Capital Territory | <input type="checkbox"/> | New South Wales   | <input type="checkbox"/> |
| Northern Territory           | <input type="checkbox"/> | Queensland        | <input type="checkbox"/> |
| South Australia              | <input type="checkbox"/> | Tasmania          | <input type="checkbox"/> |
| Victoria                     | <input type="checkbox"/> | Western Australia | <input type="checkbox"/> |

### CONTACT:

A: Suite 1102, Level 11, 55 Clarence Street, Sydney, NSW, 2000  
E: [apco@apco.org.au](mailto:apco@apco.org.au)  
P: (02) 8381 3700

## OPERATIONS

Respond to the following statements with either ‘yes’ or ‘no’.  
A comment box has also been provided to include further clarification.

		YES	NO
1.	Are you the owner or licensee in Australia of a trademark (registered or not) under which a product is sold or otherwise distributed in Australia?		
2.	Are you the franchisee of a business arrangement that allows an individual, partnership, or company to operate under the name of an already established business in Australia?		
3.	Are you the first person to sell an imported product in Australia?		
4.	Are you a supplier of packaging to retailers?		
5.	Do you import, manufacture, or provide plastic bags to consumers to transport products purchased at the point of sale?		

## PRIVACY NOTICE

The privacy of your personal information is important to the Australian Packaging Covenant Organisation (APCO) and is protected by law. Information provided on this form will be used by APCO to assist in determining outcomes of the Brand Audit conducted by APCO. If the information is not provided, APCO may be unable to complete the Brand Audit. APCO may be required to share details (including personal information) provided on this form (either on its own or in combination with other information held by APCO) to Australian government bodies to determine final outcomes from the Brand Audit. APCO does not intend to disclose any information collected via this form to any recipient located outside Australia.

For more information on APCO’s protection of personal information, and information on how you may complain about how APCO collects, uses, discloses and otherwise handles personal information, go to [documents.packagingcovenant.org.au/other-public-documents/APCO Privacy Policy](https://documents.packagingcovenant.org.au/other-public-documents/APCO-Privacy-Policy). If you wish to contact APCO in respect of APCO’s collection, use and disclosure of personal information, please use the contact details set out in the APCO Privacy Policy.

## EXECUTIVE DETAILS

*This form must be completed by a senior executive of the entity listed above. This can be a CEO, CFO, COO, Owner etc.*

By signing this form, you acknowledge that all details provided in this form are true and accurate at the time of signing.

**Full Name**

**Position Title**

\_\_\_\_\_

\_\_\_\_\_

**Signature**

**Date**

\_\_\_\_\_

\_\_\_\_\_

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