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| Accountant’s statement |
| Non-Emergency Patient Transport – Licencing |
| OFFICIAL |

The *Non-Emergency Patient Transport and First Aid Services Act 2003* (the Act) requires the Secretary of the Department of Health (the department) to assess the fitness and propriety of a current or prospective NEPT licence holders (applicant), including whether or not the applicant is of sound financial reputation and stable financial background.

The following statement is to be completed by a Certified Practicing Accountant (CPA), Chartered Accountant (CA) or Public Accountant. This statement is provided for the sole purpose of assisting the department to assess an application made under the Act.

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| **Name of NEPT service licence /certificate holder (proprietor of licence)** |  |
| **Name of NEPT service (trading name)**  \**if different from above* |  |
| **Accounting practice business name and ABN** |  |
| **Accountant’s name** |  |
| **Accountant’s address** | Postcode: |
| **Qualification** | Certified Practicing Accountant  Chartered Accountant  Public Accountant |
| I have considered all relevant documentation relating to the financial affairs of the above NEPT licence/certificate holder. I am satisfied that at the time of making this statement, the licence/certificate holder:   * has, and is likely to continue to have, the financial capacity to operate a NEPT service for a period of two (2) years; * is able to pay payroll and associated staff costs and * is able to pay its debts when they become due and payable. | |

 Please attach any qualifications to, or explanations of, the above statement that you may wish to make.

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| **Full name of Declarant (please print)** |  | | |
| **Signature of Declarant** |  | **Date** | Click here to enter a date. |

Email completed applications to: Attention Manager, [NEPTFirstAidRegulation@health.vic.gov.au](mailto:NEPTFirstAidRegulation@health.vic.gov.au)

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