

NORTHERN TERRITORY OF AUSTRALIA

TRAFFIC AMENDMENT REGULATIONS 2009

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Subordinate Legislation No. 30 of 2009

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# NORTHERN TERRITORY OF AUSTRALIA

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Subordinate Legislation No. 30 of 2009\*

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## ***Traffic Amendment Regulations 2009***

I, Thomas Ian Pauling, Administrator of the Northern Territory of Australia, acting with the advice of the Executive Council, make the following regulations under the *Traffic Act*.

Dated 26 August 2009

T. I. Pauling  
Administrator

By His Honour's Command

D. P. Lawrie  
Treasurer  
acting for the  
Minister for Transport

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\* Notified in the *Northern Territory Government Gazette* on 2 September 2009.

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**1 Citation**

These Regulations may be cited as the *Traffic Amendment Regulations 2009*.

**2 Regulations amended**

These Regulations amend the *Traffic Regulations*.

**3 Amendment of regulation 61 (Forms)**

(1) Regulation 61

*omit*

For the purposes of section 29AAW

*substitute*

(1) For section 29AAU

(2) Regulation 61, table, items 3 to 5

*omit, substitute*

3. May be used by a member of the staff of a hospital or health centre:

- (a) when a sample of blood is taken from a person under section 29AAK of the Act; or
- (b) when a person refuses or fails to submit to the taking of a sample of blood; or
- (c) when no sample of blood is taken for a reason mentioned in section 29AAK(5) of the Act.

5. May be used by an authorised analyst, or a person employed by an organisation that is an authorised analyst, after completion of analysis of a blood sample for the testing for alcohol.

6. May be used by an authorised analyst, or a person employed by an organisation that is an authorised analyst, after completion of analysis of a blood sample for the testing for drugs.

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(3) After regulation 61(1)

*insert*

(2) For section 29AAM(2) or 29AAN(2) of the Act, a form approved by the Commissioner of Police is an approved form for a notice under the section.

#### **4 Repeal and substitution of Schedule 1A**

Schedule 1A

*repeal, substitute*

### **Schedule 1A Drugs prescribed for section 28 of Act**

regulation 55A

#### **Part A**

The following drugs are prescribed for section 28(6)(a) of the Act:

Delta-9-tetrahydrocannabinol (THC)

Methylamphetamine

3,4-Methylenedioxymethamphetamine (MDMA)

Methylenedioxyamphetamine (MDA)

Monoacetylmorphine (heroin metabolite)

Benzoylmethylecgonine (cocaine)

Benzoylecgonine (cocaine metabolite)

#### **Part B**

The following drugs are prescribed for section 28(6)(b) of the Act:

Morphine

Methadone

Amphetamine

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**5 Amendment of Schedule 2**

Schedule 2, Forms 5 and 6

*omit, substitute*

**NORTHERN TERRITORY OF AUSTRALIA**

***Traffic Regulations***

**FORM 5**

**CERTIFICATE ON COMPLETION OF ANALYSIS OF BLOOD SAMPLE  
(TEST FOR ALCOHOL)**

I, *(name)*

☐ an authorised analyst,  
*or*

☐ a person employed by *(name of organisation)*  
an organisation that is an authorised analyst,

certify as follows:

- (a) on *(date)* a sealed container bearing the identification number  
*(enter number)*, accompanied by the certificate attached  
to this form, was received at *(place of analysis)* ;
- (b) the container contained a sample of blood;
- (c) an analysis of the sample was carried out and the analysis disclosed the  
presence in the blood of a concentration of                      mg of alcohol  
per 100 ml of blood;
- (d) I examined the laboratory's records relating to the receipt, continuity of  
custody and storage of the container and testing of the sample (including  
the test process) that was done in the laboratory and I confirm the  
records indicate that all relevant quality assurance procedures were  
complied with.

Signed

Date

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**NORTHERN TERRITORY OF AUSTRALIA**

***Traffic Regulations***

**FORM 6**

**CERTIFICATE ON COMPLETION OF ANALYSIS OF BLOOD  
SAMPLE (TEST FOR DRUG)**

I, *(name)*

[ ] an authorised analyst,

*or*

[ ] a person employed by *(name of organisation)*  
an organisation that is an authorised analyst,

certify as follows:

- (a) on *(date)* a sealed container bearing the identification number  
*(enter number)*, accompanied by the certificate attached  
to this form, was received at *(place of analysis)* ;
- (b) the container contained a sample of blood;
- (c) an analysis of the sample was carried out and the analysis disclosed the  
presence in the blood of the following:

\*Delta-9-tetrahydrocannabinol (THC)

\*Methylamphetamine

\*3,4-Methylenedioxymethamphetamine (MDMA)

\*Methylenedioxyamphetamine (MDA)

\*Monoacetylmorphine (heroin metabolite)

\*Benzoylmethylecgonine (cocaine)

\*Benzoylecgonine (cocaine metabolite)

\*Morphine

\*Methadone

\*Amphetamine

*\*Delete items not detected/not tested for*

- (d) I examined the laboratory's records relating to the receipt, continuity of  
custody and storage of the container and testing of the sample (including  
the test process) that was done in the laboratory and I confirm the  
records indicate that all relevant quality assurance procedures were  
complied with.

Signed

Date