

Please note: All fields marked with a * **must** be completed. If these fields are blank or incorrect, your application may be rejected.

Regulator Customer Number (RCN) (if known)

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If you have an RCN do not complete Section 1.

Section 1

Applicant Details

Applicant's Name (must be Company or Individual)

*

Australian Business Number (ABN) or Australian Company Number (ACN) ABN/ACN is not required for Individuals

*

Trading As Name (if applicable)

Registered Company Address (or Business Address for individuals)

	State		Postcode	
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Postal Address (if same as Registered Company write "As Above")

	State		Postcode	
--	-------	--	----------	--

Billing Postal Address (if same as Postal write "As Above")

	State		Postcode	
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Section 2

Contact Person's Details

Full Name

Title/Position

Phone Number

Fax Number

Mobile Phone Number

Billing Person's Details Same as Contact Person Details

Full Name

Phone Number

Fax Number

Section 3

Applicant Declaration

I hereby declare that all details provided in this application are true and correct. Knowingly making a false statement to the NHVR may attract significant penalties under section 701 of the Heavy Vehicle National Law.

Applicant's Name

Title / Position

Privacy Statement

The NHVR is collecting the information on this form for the purpose of assessing heavy vehicle access under the Heavy Vehicle National Law (HVNL) and Regulations. This information is authorised or required by the HVNL.

Where relevant, the NHVR may disclose your personal information to third parties, including law enforcement agencies, road and asset owners. Your privacy will be respected and your personal information will be handled and disclosed in accordance with the Information Privacy Act 2009 and other relevant legislation.

Applicant's Signature

Date Signed

Special purpose vehicle permit application

Heavy Vehicle National Law Section 123

Section 4

Vehicle Details

Mobile Crane
 Concrete Pump
 Drilling Rig
 Other:

Load Sharing Suspension
 Yes
 No

Are you enrolled in IAP?
 Yes: State
 No

Extra states (if applicable)

Vehicle Registration Number	Vehicle Registration State	Vehicle Identification Number (VIN/Chassis Number) if unregistered supply PLEASE DON'T USE CAPS	Vehicle Make	Vehicle Model	GVM/ GCM/ ATM	Dolly/Jinker Registration Number (if used)	Dolly/Jinker State of Registration	Dolly/Jinker Number of axles

Vehicle Dimensions

Forward Projection (m)
 Rear Overhang (m)
 Removed Parts (counter weight)

Width (m)
 Length (m)
 Height (m)
 Total Mass (t)

Section 4 (cont'd...)

Loaded Axle Mass and Spacings

Using the table provide the following details (if additional space is required please attach the [Additional Axle Mass and Spacings](#) page with details)

Unit Number	Axle	Number of tyres	Steerable axle (select if applicable)	Distance from previous axle (m)	Tyre size (mm)	Ground Contact Width (m)	Axle mass requested (t)
1	1						
	2						
	3						
	4						
	5						
	6						
	7						
	8						
	9						
	10						
	11						
	12						
	13						
	14						
	15						
	16						
	17						
	18						
	19						
	20						
	21						
	22						
	23						
	24						
	25						

Description of vehicle (e.g. 5 axle crane with boom reversed on to a 3 axle dolly)

Special purpose vehicle permit application

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Section 5

+ Permit Type

oversize only overmass only oversize and overmass

+ Period

Please indicate required period.

Period from

 / /

Period to

 / /

Period Permit (only applicable to certain combinations)

Single Trip

Note – Requested period cannot exceed 3 years

Permit issued by:

NHVR NSW VIC TAS

QLD ACT SA

Permit Number

+ + Please attach existing permit. For jurisdictional permits, all pages of the permit must be attached.

Section 6

+ Route/Area Details

Start Address (Full Address including street number)

 state postcode

Destination Address (Full Address including street number)

 state postcode

Journey ID and Version Number

Do you require a return trip? Yes No

Route/Area Description (certain vehicle configurations may be restricted to routes only)

Third party consent

You may be required under law to consult with one or more other entities and seek their approval in relation to your application.

In this case, the relevant road manager/s may commence their decision making process, however the Regulator cannot grant your permit until you provide evidence that approval has been given by the third party/ies

e.g. Rail Networks, Energy Providers, Telecommunication Networks.

Please provide evidence of third party approvals with this application Tick if attached

If you are unable to provide at time of submission please supply as soon as possible via email, fax, post or mail clearly marked "Access Management – 3rd Party Approval Evidence" – quoting the case number and your RCN.

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Special purpose vehicle permit application

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Payment Details

Notes:

- Preferred payment is by credit card

Payment Method (tick one)

Credit Card

Cheque

(please make cheques payable to the National Heavy Vehicle Regulator).

A separate cheque is required for each application if choosing to pay by one of these types.

Payment Amount – \$88.00 inc GST

If you wish to pay the application fee by Credit Card, please complete the details below

Card Type

Visa MasterCard American Express

Name on Credit Card (please print)

Card Number

Card Expiry

 /

Cardholder Signature

Date Signed

Contact Details

Send completed applications and supporting information with payment details by Mail or Fax to the details listed below.

Mail Access Management
National Heavy Vehicle Regulator
PO Box 492
Fortitude Valley QLD 4006

Fax 1300 880 423

To contact the Access team

Phone Number 13 NHVR (13 64 87)
Standard 1300 call charges apply
Please check with your phone service provider

Office Hours 7:00am - 5:00pm (AEST)

Website www.nhvr.gov.au