

B Double Permit Application

Heavy Vehicle National Law Section 144

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

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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	
Shore Marshau	
Phone Number Fax Number	
Section 3 Applicant Declaration I hereby declare that all details provided in this application are tromay attract significant penalties under section 701 of the Heavy V Applicant's Name	
Title / Position	
Privacy Statement The NHVR is collecting the information on this form for the purpose of a (HVNL) and Regulations. This information is authorised or required by th Where relevant, the NHVR may disclose your personal information to th Your privacy will be respected and your personal information will be har and other relevant legislation.	e HVNL. ird parties, including law enforcement agencies, road and asset owners.
Applicant's Signature	
	≱ Date Signed

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Section 4	Vehicle Details (only applicable if vehicle	operating under	livestock load scheme)
Length 19m	Vehicle Registration Number	Vehicle Registration State	Vehicle Identification Number (VIN/Chassis Number) PLEASE DON'T USE CAPS
Load Details Freight type General freight Commodity please supply type			
Livestock Dangerous Goods Car Carrier Vehicle operating under livestock load scheme State			
Other If Other, please describe freight type			
Section 5 Period Please indicate permit period. Period from Period to / / / Note – Requested period cannot exceed 3 years Permit issued by: NHVR NSW VIC TAS Permit Number			ACT SA
Section 6			
Route/Area Details Start Address (Full Address including street number)	Destination Address (Fu	ıll Address includ	ing street number)
state postcode		s	tate postcode
Journey ID and version number			
Route/Area Description			





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Payment Details	Contact Detail	S				
Notes: • Preferred payment is by credit card	Send completed applications and supporting information with payment details by Mail or Fax to the details listed below.					
Payment Method (tick one) Credit Card Cheque	Mail	Access Management National Heavy Vehicle Regulator PO Box 492 Fortitude Valley QLD 4006				
(please make cheques payable to the National Heavy Vehicle Regulator).	Fax	1300 880 423				
A separate cheque is required for each application if choosing to pay by one of these types.						
Payment Amount – \$91.00 inc GST	To contact the Access team					
If you wish to pay the application fee by Credit Card, please complete the details below Card Type	Phone Number	13 NHVR (13 64 87) Standard 1300 call charges apply Please check with your phone service provide				
Visa MasterCard	Office Hours	7:00am - 5:00pm (AEST)				
Name on Credit Card (please print)	Website	www.nhvr.gov.au				
Card Number Card Expiry Cardholder Signature Date Signed						