

**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)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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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)

<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Postal Address (if same as Registered Company write "As Above")

<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Billing Postal Address (if same as Postal write "As Above")

<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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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

# B Double Permit Application

Heavy Vehicle National Law Section 144

## Section 4

### Length

19m (50t to 55t)    
  23m    
  25m    
 If vehicle is a 26m B-double please select 25m

### 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

## Vehicle Details

(only applicable if vehicle operating under livestock load scheme)

Vehicle Registration Number	Vehicle Registration State	Vehicle Identification Number (VIN/Chassis Number) PLEASE DON'T USE CAPS

## 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    
  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)

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state 
postcode

Destination Address (Full Address including street number)

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state 
postcode

Journey ID and version number

Route/Area Description

### 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](http://www.nhvr.gov.au)