

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)

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

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

 State Postcode

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

 State Postcode

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

Section 4

Vehicle Details

Short Combination
 B-Double
 B Triple up to 36.5m
 Road Train
 AB-Triple up to 36.5m
 Road Train 36.5m to 53.5m
 Road Train up to 36.5m
 Other

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

IAP Details

Are you enrolled in IAP? Yes State
 No
 Extra states (if applicable)

Note: For further information regarding applicable axle groups and vehicles for HML, please refer to the HML information bulletin.

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

Section 6

+ Route/Area Details

Start Address (Full Address including street number)

state postcode

Journey ID and version number

Destination Address (Full Address including street number)

state postcode

Route/Area Description

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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

 /

CVV

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