

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	
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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

✚

Email Address

✚ **Billing Person's Details** Same as Contact Person Details

Full Name

Phone Number

Fax Number

Email Address

Preferred Method for sending of Billing details (please select one only) Email Post

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

If providing an electronic signature please consent to the following: I accept the electronic signature has the same status as a signed signature.

✚ Date Signed

Section 4

Permit Details

Permit Type

Note: 1 permit type per replacement application

Permit issued by:

- NHVR NSW VIC TAS
 QLD ACT SA

Permit Number

Replacement

- Defaced Destroyed
 Lost Stolen

Contact Details

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

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

Fax 1300 880 423

Email accessenquiries@nhvr.gov.au

To contact the Access team

Phone Number 1300 MYNHVR (1300 696 487)
Standard 1300 call charges apply
Please check with your phone service provider

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

Website www.nhvr.gov.au