

General information

This form is for:

- · drivers* seeking to apply for or remake an exemption from having to comply with work diary requirements
- operators seeking to apply for or remake an exemption from having to comply with fatigue record keeping requirements.

For further information on work diary and record keeping exemption (permit), refer to the NHVR website or call the NHVR contact centre. You will find contact information within this form.

Before you begin:

Work diary exemption:

- Consult a qualified person (doctor, psychologist, etc.) about your literacy.
- Get a nominee to agree to make written work records for you.

Record keeping exemption:

• Prepare supporting documentation.

Form checklist
All relevant sections of this form are complete
For applicants for work diary exemption (permit):
Signed statement from a qualified person attesting to the applicant's literacy difficulties/print disability
Completed nominees agreement to nomination
For applicants for record keeping exemption (permit):
Completed accreditation details
Completed drivers list

^{*} An employer of a driver may make an application for a work diary exemption on their employee's behalf.



Regulator Customer Number (RCN) If you have an RCN, please disregard completing applicant details.	Conditions sought for fatigue management exemption (permit) Nominate your alternative method for recording work and rest details
Exemption holder details Name (must be company or individual) Driver licence number	
Current fatigue work and rest hour exemption permit number to be amended	
Australian Company Number (ACN) (ACN is not required for individuals)	
Trading as name (if applicable)	
Registered company address (or business address for individual)	Applicant declaration
Primary physical operating address State Postcode Postcode	I confirm that I have read and understand the conditions applicable to working under a work diary and/or record keeping exemption (permit) as outlined in the legislative references section of this site. I hereby declare that all details provided in this application are true and correct. Giving false and misleading information is a serious offence. Penalties apply. Applicant's name
Operator postal address	Title / position
State Postcode Business phone number Business fax number	Applicant's signature
Mobile phone number Email address	If providing an electronic signature please consent to the following: I accept the electronic signature has the same status as a signed signature.
Preferred method of contact (please select one only)	Date signed / /
Phone Mobile Email Post Fax	Type of exemption being sought: record keeping exemption (permit) work diary exemption (permit) For work diary exemptions you must complete the nomination and consent section and attach a statement from a qualified person. Requested duration of exemption 1 year 2 years 3 years

Note: For an individual, Evidence of identity (EOI) appropriate for a vehicle registration or driver licensing transaction carried out in that jurisdiction.



Nominee's consent
I confirm that I have read and understood the conditions applicable to being the nominated person for a driver working under a work diary exemption (permit). I consent to completing the written work diary for the exemption holder in accordance with the conditions set out in the exemption (permit). Nominee'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.
a signed signature.
PRIVACY STATEMENT Date signed / /
]
J

Privacy Statement

The NHVR is collecting your personal information to establish a work diary exemption permit under Chapter 6 of the Heavy Vehicle National Law Act.

We are authorised under this Act to collect information we reasonably require to decide this application.

We may disclose protected information contained in your application for the purposes set out in section 727 of the Act to an entity (including a private or public sector entity) identified in that section. This can include disclosure to an authorised employee or agent of the entity.

We may disclose protected information to a law enforcement agency, including a service provider authorised to enforce the Heavy Vehicle National Law nationally. A police agency may disclose protected information disclosed to or otherwise held by it to another police agency authorised to hold protected information.



Record keeping exemption (permit) only

Driver's full name		Licence issuing	Modules	
	Licence number	state	BFM (tick)	AFM (tick)
			(3.3.7)	(44.7)

If there is insufficient space you may enter add and / or delete drivers into the NHVAS Additional information spreadsheet.



Contact details

Submit completed applications and supporting information by mail, fax or email as listed below:

Mail Accreditation Unit

National Heavy Vehicle Regulator

PO Box 492

Fortitude Valley QLD 4006

Fax 1300 736 798

Email accreditation@nhvr.gov.au

To contact the NHVR Accreditation Team:

Call 13 NHVR (13 64 87)

Standard 1300 call charges apply

Please check with your phone service provider

Visit www.nhvr.gov.au