

General information

This form is for exemption holders seeking to amend a fatigue management exemption (permit). You can change details around your identity or propose changes to the work and rest hour exemption (permit) itself. If you are changing the work and rest hour permit you need to provide a new safety case.

For further information on fatigue management, refer to the NHVR website or call the NHVR contact centre. You will find the contact information within this form.

Before you begin:

- Examine BFM and AFM options that may be suitable for your work and rest times.
- Determine the work and rest hours you want to operate under this fatigue exemption permit.
- Collect required information for your application.
- Develop a safety case which details your proposed alternative fatigue management practices including risk assessment, mitigation and contingency plans.
- Review work and rest hour schedules in order to comply with the exemption permit.
- Prepare supporting documentation for application.

Form checklist

- Amendment form completed and signed
- Copy of a documented safety case attached (if required)
- Providing work and rest hour schedules for the amended exemption (if required)
- Safety case outlining fatigue management practices including:
 - Reasons for changing your current work and rest hour provisions
 - Risk assessment including counter measures and contingency plans
 - Inspection/Observation reporting process for signs of fatigue impairment
 - Monitoring competency in controlling fatigue related risk of work and rest hour schedules
 - Review and identify improvement strategies in your fatigue management exemption
 - Report the effectiveness of the fatigue management practices.

Amend work and rest hour exemption (permit)

Regulator Customer Number (RCN)

If you have an RCN, please disregard completing the exemption holder details.

What amendments do you wish to make?

Change exemption holder details

Amend work and rest hours exemption (permit) 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)

 State Postcode

Primary physical operating address

 State Postcode

Operator postal address

 State Postcode

Business phone number

Business fax number

Mobile phone number

Email address

Preferred method of contact (please select one only)

Phone
 Mobile
 Email
 Post
 Fax

Amended 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)

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 State Postcode

Primary physical operating address

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Operator postal address

 State Postcode

Business phone number

Business fax number

Mobile phone number

Email address

Preferred method of contact (please select one only)

Phone
 Mobile
 Email
 Post
 Fax

Amend work and rest hour exemption (permit)

Amended work and rest exemption (permit) details

Requested duration of exemption

1 year 2 years 3 years

Have you considered AFM or BFM accreditation?

Yes No

Outline of proposed work and rest hours exemption (permit)
(attach additional information if need)

Exemption holder declaration

I confirm that I have read and understand the conditions applicable to national heavy vehicle work and rest hour exemption (permit) as outlined in the legislation 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.

I declare that the relevant fatigue management practices are in place for ensuring compliance with the NHVR legislation and standards.

Name

Title / position

Signature

If providing an electronic signature please consent to the following:

I accept the electronic signature has the same status as a signed signature.

[PRIVACY STATEMENT](#)

Date signed

/ /

Note that application for work and rest hour exemption permits may require further information and the NHVR may contact you.

Privacy Statement

The NHVR is collecting your personal information to amend a work and rest hour exemption permit issued 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.

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 AccreditationTeam:

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

Visit www.nhvr.gov.au