





Contact Person's Details

Full Name

Title/Position

Phone Number

--	--

Fax Number

--	--

Mobile Phone Number

[illegible]

 Billing Person's Details ☐ Same as Contact Person Details

Full Name

Phone Number

--	--

Fax Number

--	--

--	--	--	--	--	--	--	--

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.

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

--	--	--	--	--	--

AccessAG

Agricultural vehicle permit application

Heavy Vehicle National Law Section 123

Section 4

Vehicle Details

Vehicle Registration Number	Vehicle Registration State	Vehicle Identification Number (VIN/Chassis Number) PLEASE DON'T USE CAPS	Vehicle Make	Vehicle Model	Type e.g. Harvester	GVM/ATM/GCM

Vehicle Dimensions

Width (m)

Length (m)

Height (m)

Forward Projection (m)

Rear Overhang (m)

Total Mass (t)

Removed Parts

Loaded Axle Mass and Spacings

Using the table provide the following details (if additional space is required please attach the [Additional Axle Mass and Spacings](#) page with details)

Unit Number	Axle	Number of tyres	Steerable axle	Distance from previous axle (m)	Tyre size (mm)	Ground Contact Width (m)	Axle mass requested (t)
1	1						
	2						
	3						
	4						
	5						
	6						
	7						
	8						
	9						
	10						
	11						
	12						
	13						
	14						
	15						
	16						
	17						
	18						
	19						
	20						

Section 5

* Permit Type

☐ oversize only ☐ overmass only ☐ oversize and overmass

* Period

Please indicate required period

Period from

 / /

Period to

 / /

☐ Period Permit (only applicable to certain combinations)

☐ Single Trip

Note – Requested period cannot exceed 3 years

Permit issued by:

☐ NHVR

☐ NSW

☐ VIC

☐ TAS

☐ QLD

☐ ACT

☐ SA

Permit Number

*

* Please attach existing permit (if applicable).

Section 6

* Route/Area Details

Start Address (Full Address including street number)

 state postcode

Destination Address (Full Address including street number)

 state postcode

Journey ID and Version Number

Route/Area Description (certain vehicle configurations may be restricted to routes only)

Third party consent

You may be required under law to consult with one or more other entities and seek their approval in relation to your application.

In this case, the relevant road manager/s may commence their decision making process, however the Regulator cannot grant your permit until you provide evidence that approval has been given by the third party/ies

e.g. Rail Networks, Energy Providers, Telecommunication Networks.

Please provide evidence of third party approvals with this application ☐ Tick if attached

If you are unable to provide at time of submission please supply as soon as possible via email, fax, post or mail clearly marked "Access Management – 3rd Party Approval Evidence" – quoting the case number and your RCN.

THIS PAGE HAS BEEN LEFT
INTENTIONALLY BLANK

