

Controlled access bus NHVR 12.5m-14.5m permit application

Please note: All fields marked with a * <u>must</u> be completed. If these fields are blank	or incorrect	t, your ap	plication may	be reje	cted.
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)					
		1 1			
Australian Business Number (ABN) or Australian Company Number (ACN) ABN/ACN is not r	equired for I	ndividuals			
Trading As Name (if applicable)					
		1 1			
Registered Company Address (or Business Address for individuals)					
					,
	State		Postcode		一
	State		rostcode		
Postal Address (if same as Registered Company write "As Above")					
]		\Box
	State		Postcode		
Billing Postal Address (if same as Postal write "As Above")					
		1 1]		\perp
	State		Postcode		





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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 t may attract significant penalties under section 701 of the Heavy Applicant's Name	rue and correct. Knowingly making a false statement to the NHVR Vehicle National Law.					
Title / Position						
Title / Position						
Privacy Statement The NHVR is collecting the information on this form for the purpose of (HVNL) and Regulations. This information is authorised or required by the Where relevant, the NHVR may disclose your personal information to the Your privacy will be respected and your personal information will be held and other relevant legislation.	assessing heavy vehicle access under the Heavy Vehicle National Law he HVNL. hird parties, including law enforcement agencies, road and asset owners. indled and disclosed in accordance with the Information Privacy Act 2009					
Applicant's Signature						
5	≱ Date Signed					



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Heavy Vehicle National Law Section 144

Section 4

Vehicle Details

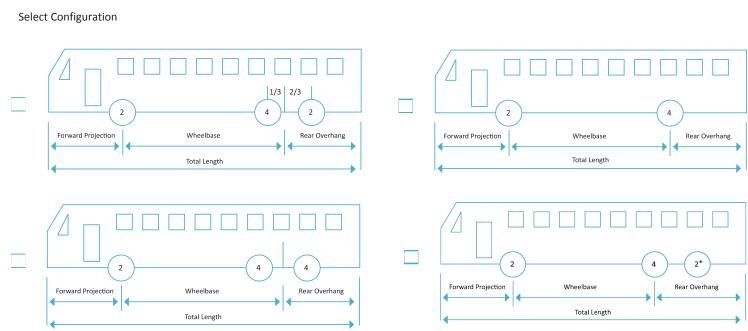
Vehicle Registration Number	Vehicle Registration State	Vehicle Identification Number (VIN/Chassis Number) PLEASE DON'T USE CAPS

Bus Details

How to measure

Please refer to the diagrams below on how to measure the forward projection, wheelbase, total length, and rear overhang.

Forward Projection (m) 🌟	Wheelbase (m) 🍁	Total Length (m) 🍁	Rear Overhang (m) 🜟





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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 exis	ting permit (if applicable).
Section 6 Route/Area Details	
Start Address (Full Address including street number)	Destination Address (Full Address including street number)
Start Address (Full Address including street number) state postcode	Destination Address (Full Address including street number) state postcode
state postcode	state postcode
state postcode	



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Heavy Vehicle National Law Section 144

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Payment Details	Contact Detail	s	
Notes: • Preferred payment is by credit card	Send completed applications and supporting information with payment details by Mail or Fax to the details listed below.		
Payment Method (tick one) Credit Card Cheque	Mail	Access Management National Heavy Vehicle Regulator PO Box 492 Fortitude Valley QLD 4006	
(please make cheques payable to the National Heavy Vehicle Regulator).	Fax	1300 880 423	
A separate cheque is required for each application if choosing to pay by one of these types.			
Payment Amount – \$91.00 inc GST	To contact the Access team		
If you wish to pay the application fee by Credit Card, please complete the details below Card Type	Phone Number	13 NHVR (13 64 87) Standard 1300 call charges apply Please check with your phone service provide	
Visa MasterCard	Office Hours	7:00am - 5:00pm (AEST)	
Name on Credit Card (please print)	Website	www.nhvr.gov.au	
Card Number Card Expiry Cardholder Signature Date Signed			

