

Accesses Performance based standards permit application

Heavy Vehicle National Law Section 144

Please note: All fields marked with a	* must be completed	I. If these fields are blank or inco	rrect, your application n	nay be rejected.
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Section 2

	Contact Person's Details		
	Full Name		
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	Title/Position		
k			
	Phone Number	Fax Number	Mobile Phone Number

Billing Person's Details Full Name Phone Number Fax Number

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.

Title / Position	 		 	
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

🝁 Date Signed				
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AccessPBS Performance based standards

permit application

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Section 4 PBS Details Do you have a PBS Design Approval OR Do you have a PBS Final Approval (FA) or Vehicle Approval (VA) Number No (please refer to NHVR website for instructions on obtaining DA approval) No (please attach vehicle certification documents to this application) Yes PBS Design Approval Number Yes Yes Yes PBS final approval number (vehicle approval number)

Section 5

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

Operating Mass and Access Level

*	*	*	*
Level	GML (tick applicable)	CML (tick applicable)	HML (tick applicable)
1			
2A			
2B			
3A			
3B			
4A			
4B			

Other (Please complete section 7)

If you are seeking access for a route that is not an approved PBS route for the level of vehicle, please use the GIS for selecting the route.

Please note: If selecting HML, please include CML and GML as well, in case HML is denied by the road manager.



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Section 6

*	Period					
	Please indicate permit period					
	Period from	Period to				
	/ /	/	/			
	Note – Requested period canr	not exceed 3 years				
*	Permit issued by:					
	NHVR	NSW	VIC	TAS		
	QLD	ACT	SA			
	Permit Number					
*			🛊 Please attach existir	ng permit (if applicable).		

Section 7

***** Route/Area Details

Start Address (Full Address including street number)	Destination Address (Full Address including street number)
statepostcode	state postcode
Journey ID and version number	
	1
Route/Area Description	



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Payment Details	Contact Detai	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.	TUX	1500 000 425			
Payment Amount – \$91.00 inc GST	To contact the Ac	ccess team			
If you wish to pay the application fee by Credit Card, please complete the details below	Phone Number	13 NHVR (13 64 87) Standard 1300 call charges apply Please check with your phone service provider			
Card Type 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					