



Please note: All fields marked with a * must be completed. If these fields are blank or incorrect, your application may be rejected. 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) Australian Business Number (ABN) or Australian Company Number (ACN) ABN/ACN is not required for Individuals Trading As Name (if applicable) Registered Company Address (or Business Address for individuals) Postcode State Postal Address (if same as Registered Company write "As Above") Postcode State Billing Postal Address (if same as Postal write "As Above") State Postcode







Section 2 Contact Person's Details Full Name		
Title/Position		
Phone Number Fax Number	Mobile Phone Number	
Full Name Phone Number Fax Number		
Section 3 Applicant Declaration I hereby declare that all details provided in this application are tremay attract significant penalties under section 701 of the Heavy Napplicant'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. 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 <i>Information Privacy Act 2009</i> and other relevant legislation.		
Applicant's Signature		
5	‡ Date Signed	



Permit Details Permit Type Note: 1 permit type per renewal application Permit issued by: NHVR NSW VIC TAS QLD ACT SA Permit Number Please attach existing permit.
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QLD ACT SA Permit Number
Permit Number
Please attach existing permit.
Requested Renewal Period
Period from Period to
/ /
Note – Requested period cannot exceed 3 years and can only be submitted 6 weeks prior to



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Payment Details	Contact Details	
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	Phone Number	13 NHVR (13 64 87) Standard 1300 call charges apply Please check with your phone service provide
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		
Date Signed		

