

# Proof of Identity Nominated Owner/Vehicle Licence Holder

The information you supply on this form may be disclosed to other government agencies where provided for in legislation. The Director General of the Department of Transport also releases aggregated statistical information to third parties. However, your personal identifying information will not be released to these persons without your explicit consent.

This form must accompany an Application for Vehicle Licensing/Transfer in order to verify the applicants particulars. This form is also to be used where an owner is required to be nominated (where the vehicle is jointly owned). This may occur on transfer or grant of a vehicle licence. If you require assistance with any question on this form, please contact the Department of Transport on 13 11 56.

Please note:

- If the form is presented by an agent, the name and address of the agent must be provided.
- It is an offence to make any statement that is false or misleading.

1. VEHICLE DESCRIPTION	
PLATE NUMBER	CHASSIS/VIN
MAKE	BODY TYPE

## 2. GARAGE ADDRESS

Garage address means 'the address where the vehicle is kept when not in use'. Vehicles (including trailers, caravans etc.) cannot be licensed in Western Australia if they are garaged in another State or Territory.

Is the vehicle garaged in another State or Territory?

No  Go to part 3      Yes  The vehicle cannot be licensed in Western Australia

## 3. IS THE APPLICANT AN INDIVIDUAL, A JOINT OWNER OR A COMPANY / INCORPORATED BODY?

Individual                      Go to part 4                       Company / Incorporated Body                      Go to part 5   
 Joint Owner                      Go to part 6

## 4. INDIVIDUALS

Before a vehicle can be licensed to an individual, they must have attained the minimum age of:

- 18 years or older for **heavy** vehicles (vehicles with a Mass Rating for Charging over 4500kg); or
- 16 years or older for **any other** vehicle (inc. trailers, motorcycles etc.)

Licence vehicle to:

FAMILY NAME	GIVEN NAMES	
RESIDENTIAL ADDRESS	POST CODE	PHONE NUMBER
POSTAL ADDRESS	POST CODE	

### Proof of Identity

You will need to prove your identity by providing **one** of the following:

- A Western Australian driver's licence number; or
- Primary and secondary documentary proof of your Date of Birth (DOB) (eg. Passport, Birth Certificate. Original or certified copies only will be accepted) or
- An organisation code if the Department of Transport has already issued you with one (ask Driver and Vehicle Services staff if you are unsure if you have an organisation code).

WA Driver's licence No.

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DOB

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Organisation Code

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Please go to part 7 'Signature'

Office Use Only	
Sighted	
DL	<input type="checkbox"/>
DOB	<input type="checkbox"/>
Verified by:	_____

## 5. COMPANIES OR INCORPORATED BODIES

COMPANY / INCORPORATED BODY NAME	PHONE NUMBER
BUSINESS ADDRESS	POST CODE
POSTAL ADDRESS	POST CODE

You will need to provide:

- Your Australian Company Number (ACN); or
- A 'Certificate of Registration of a Company' issued by the Australian Securities and Investments Commission, or any other certificate of incorporation; or
- Other evidence of legal entity status

ACN    Organisation Code

Please go to part 7 'Signature'

## 6. JOINT OWNERSHIP

**This section is to be completed only when the vehicle is jointly owned, for the purpose of licensing a vehicle.**

An owner/licence holder must be nominated. The owner/licence holder is the person to be registered by the Department of Transport as being responsible for the obligations of the vehicle licence under the *Road Traffic Act 1974*. The owner/licence holder does not infer legal title to a vehicle (that is, the nomination of a person as the 'owner/licence holder' does not mean that they solely own the vehicle).

**PLEASE NOTE:** The nominated owner/licence holder must complete section 4 or 5 of this form.

**Name and signature of all joint owners, business partners or under-age owners must be given.**

FULL NAME	SIGNATURE
DATE OF BIRTH	DRIVER'S LICENCE NUMBER
FULL NAME	SIGNATURE
DATE OF BIRTH	DRIVER'S LICENCE NUMBER
FULL NAME	SIGNATURE
DATE OF BIRTH	DRIVER'S LICENCE NUMBER

Please attach a separate page if further signatures are required

Please go to part 7 'Signature'

## 7. SIGNATURE

I certify that all details on this form are true and correct.

If applicable, I authorise the agent whose details are shown below, to licence the vehicle on my behalf.

SIGNATURE OF OWNER/LICENCE HOLDER	DATE
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**If this form is presented by an agent, the name and address of the agent must be provided.**

NAME OF AGENT	PHONE
ADDRESS OF AGENT	SIGNATURE