

Application to Change Operator Licence Business Address



1. Licencee details

Licensee name *(in full)*

Operators licence number

Mobile

Phone

Fax

2. Change details

I wish to change my operator licence business address:

From - Current address *(to be removed)*

Postcode

To - New business address

Postcode

Postal address *(if different from above)*

Postcode

3. Council requirements

All applicants must have council approval for their business address. You have an obligation to comply with local government requirements. Those obligations exist in addition to the requirements to hold a tow truck operators licence and non-compliance may result in you being prosecuted by your Council. RMS may require proof of council approval.

(a) Does your business address, described above, have current local council approval?

Yes

No

If you undertake accident towing (Category A) please answer (b)

continued

(b) Is this business address within 10km of your holding yard, as already shown on your operators licence?

Yes *(if applicable)*

No - more than 10km from business address.

If you have answered 'No' to this question you must seek separate approval from the Manager, TTLC, to have a holding yard more than 10km from your place of business.

In seeking this approval you must explain the reasons why you need a holding yard more than 10km from your place of business and state how you will ensure that this will not be detrimental to your customers.

4. Declaration

Warning: Please read carefully before you sign. If you do not tell the truth in this application you can be fined. Maximum penalty \$5,500 or imprisonment for 6 months or both.

I/We declare that the information contained in this application to change a business address on my/our tow truck operators licence is true and correct in every detail. I/we consent to the disclosure of information needed to verify the contents of this application.

I understand that the Licensee is required to keep the records and documents specified under the Tow Truck Industry Act and Regulation at the place of business nominated on this form.

I/We enclose the following documents with this application:

- Evidence of public liability insurance on the business address
- Licence amendment fee.

I/We acknowledge that information may be placed on an annual register open to the public.

Name

Relationship to Licensee

Signature

Date

day	/	month	/	year
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RMS TTLC Office use only

New business address approved?

Yes

No

Signature

Please return this form to:

Mail to: Tow Truck Licensing and Compliance, Locked Bag 5054, Parramatta NSW 2124

www.rms.nsw.gov.au | 13 22 13 | T 1300 131 134 | F 02 8849 2075 | E towtrucks@rms.nsw.gov.au