



1. Business Details

Current AIS number

Trading name

Business address

Australian Business Number (ABN)

Day time contact number

Email address

2. How is the business operated

Sole proprietor **▶ go to question 4** Company

Partnership Other (Government/Council)

3. Company or Partnership Details

Note: All Partners and Directors must provide details by completing an AIS Application for AUVIS Entity/Examiner Accreditation (Unregistered Vehicles) form.

Company / Partnership name in full

Australian Company Number (ACN) *if incorporated*

4. Details of AIS Proprietor (Sole Trader) or Proprietor's Nominee

Surname

Given names *(all names are required)*

Examiner number *(if applicable)*

5. Details of Alternate Nominee

Surname

Given names *(all names are required)*

Examiner number *(if applicable)*

6. Requirements

The table below must be completed by placing a tick in the 'Yes' box if you have the appropriate requirements or a tick in the 'No' box if you don't. If you do not have the correct equipment, your application may be refused.

	Equipment Description	Tick	
		Yes	No
1	Undercover hoist, pit or ramps Note: The premises must have at least one undercover inspection bay with hoist, or pit, or ramp.	<input type="checkbox"/>	<input type="checkbox"/>
2	Hand held Inspection lamp suitable for vehicle identification purposes.	<input type="checkbox"/>	<input type="checkbox"/>
3	Small station stamp for Inspection Reports.	<input type="checkbox"/>	<input type="checkbox"/>
4	The Proprietor is prepared to purchase an AIS sign of RMS approved design and size to display on the premises. Note: No advertising of other services is allowed on the sign.	<input type="checkbox"/>	<input type="checkbox"/>
5	Office area - Is there a separate area to conduct office work?	<input type="checkbox"/>	<input type="checkbox"/>
6	Off street parking - Does the premises have customer off street parking?	<input type="checkbox"/>	<input type="checkbox"/>
7	Computer system capable of reading CD's.	<input type="checkbox"/>	<input type="checkbox"/>
8	Fax Machine.	<input type="checkbox"/>	<input type="checkbox"/>

7. Declaration

If the business is operated by a company or partnership, a director or partner must sign this declaration.

(Please read carefully before you sign)

I accept that submission of this application does not guarantee selection for accreditation. I consent to the disclosure by the Police, Office of Fair Trading and Motor Vehicle Repair Industry Authority of information required by Roads & Maritime Services (RMS) to verify any details I have given in this application. If my application is successful, I further consent to the discretion of RMS, for the disclosure by the above organisations of any detail concerning my character or relating to my fitness to maintain my accreditation.

I declare that the information I have given in this application is correct. I understand that if any information is found to be false or misleading, my authorisation could be cancelled. I will ensure that the Rules for Authorised Inspection Stations are strictly followed.

Signature

Date

Surname

Given names *(all names are required)*

Driver's licence number

Please return this completed form to:

Enrolment Processing Glen Innes
PO Box 122, Glen Innes NSW 2370
T 1300 79 11 86 | F 1300 79 38 65 | E ais@rms.nsw.gov.au

How to complete the AIS - Application for AUVIS Station Accreditation (Unregistered Vehicles)

Information on how to complete this form

To become an Authorised Unregistered Vehicles Inspection Station (AUVIS) your station must be an accredited Authorised Inspection Station eligible to inspect one or more of the following vehicles:

- All light vehicles
- Motorcycles
- Light trailers and caravans

If you are not qualified to examine any of the above vehicles your application can not be processed.

Please answer all questions and provide as much information as possible. Failure to provide all information can result in your application not progressing or being refused. Please complete the form accurately and legibly using block capitals e.g. JOHN CITIZEN not *John Citizen*

1. Business details

AIS Number: Insert Authorised Inspection Station Number.

Trading Name: Insert your full name as indicated on your Motor Vehicle Repairers Licence (MVRIA).

Business address: Please provide your street and/or unit number, street name, suburb/town and your postcode.
e.g. Unit 2/ 456 Princes Highway, ENGADINE NSW 2233

Australian Business Number (ABN): Insert your ABN as listed on your certificate from the ATO. Your ACN is 11 digits.

Day Time Contact Number: Please provide the most suitable day time contact number for business applying to become an AUVIS in case information from your application needs to be verified.

Email address: Please provide a valid email address.
e.g. business.name@internetprovider.com.au
This may be used to send out additional information to your station.

2. How is the business operated

Place a tick in the box that represents how your business is operated.

Sole Trader: If the business is owned by one person, being you, tick the appropriate box and proceed to **4**.

Partnership: If the business is operated by a partnership, tick the appropriate box.

Company: If the business is operated by a company or corporation, tick the appropriate box.

Other: If your business is not operated as a sole trader, partnership or company, tick this box and provide details below. Family Trusts can not be accepted.

3. Company, partnership or entity details

Note: Partners and directors must provide individual details by completing an AIS Application for AUVIS Entity/Examiner Accreditation (Unregistered Vehicles) form.

Company / Partnership Name in Full: Insert the full Company / Partnership name as indicated on your Motor Vehicle Repairers Licence (MVRIA).

Australian Company Number (ACN): Insert your Australian Company Number (ACN) if the business is incorporated. Your ACN is 9 digits.

4. Details of AIS Proprietor (Sole Trader) or Proprietor's Nominee

Note: Where a Proprietor is more than one natural person, there must be a Proprietor's Nominee at the station.

In the boxes provided, insert the Entity number (if applicable), Surname and Given Names of the person who will be the Proprietor or Proprietor's Nominee.

This section is not required to be completed for a business operating as a Sole Trader.

5. Details of Alternative Nominee

In the boxes provided, insert the Entity (Examiner) number, Surname and Given Names of the person who will be the Alternative Nominee.

Only complete this section if applicable to your business.

6. Requirements

The table must be completed by placing a tick in the 'Yes' box if you have the appropriate requirements or a tick in the 'No' box if you don't. If you do not have the correct equipment, your application may be refused.

The premises must have at least one undercover inspection bay with hoist, or pit, or ramp.

7. Declaration

Ensure you read and understand the declaration fully prior to signing.

Sign in the box provided and insert the date on which the form was signed. Insert your Surname, Given Names and Drivers Licence Number.

Please return this completed form to:

Enrolment Processing Glen Innes

PO Box 122, Glen Innes NSW 2370

T 1300 79 11 86 | F 1300 79 38 65 | E ais@rms.nsw.gov.au