

Section 2

Contact Person's Details

Full Name

Title/Position

Phone Number

Fax Number

Mobile Phone Number

Email Address

Billing Person's Details

Same as Contact Person Details

Full Name

Phone Number

Fax Number

Email Address

Preferred Method for sending of Billing details (please select one only)

Email

Post

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.

Applicant's Name

Title / Position

Privacy Statement

The NHVR is collecting your personal information to process this bus permit application pursuant to Chapter 4 of the Heavy Vehicle National Law Act. We are authorised under this Act to collect information we reasonably require to process your application.

We may disclose protected information contained in your application for the purposes set out in section 727 of the Act to an entity (including a private or public sector entity) identified in that section. This can include disclosure to an authorised employee or agent of the entity.

We may disclose protected information to a law enforcement agency, including a service provider authorised to enforce the Heavy Vehicle National Law nationally. A police agency may disclose protected information disclosed to or otherwise held by it to another police agency authorised to hold protected information.

Applicant's Signature

Date Signed

Section 4

Vehicle Details

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

Bus Details

How to measure

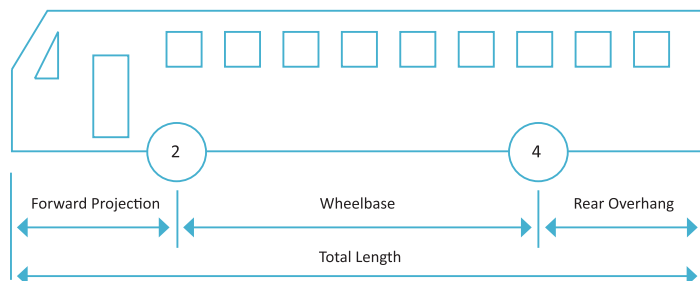
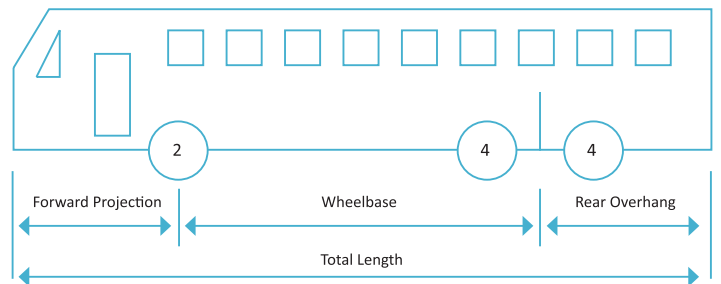
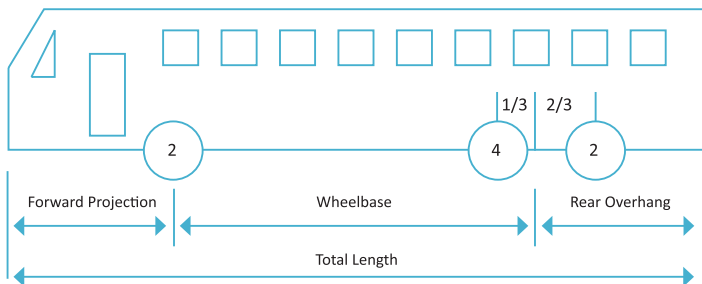
Please refer to the diagrams below on how to measure the forward projection, wheelbase, total length, and rear overhang.

Forward Projection (m)

Wheelbase (m)

Total Length (m)

Rear Overhang (m)



Section 5

Period

Please indicate permit period.

Period from

Period to

Note – Requested period cannot exceed 3 years

Permit issued by:

- NHVR NSW VIC TAS
 QLD ACT SA

Permit Number

Please attach existing permit

Section 6

Route/Area Details

Which jurisdiction are you seeking to operate?

- NSW QLD SA TAS ACT VIC
 General access B-Double networks Specific route (nominate below)

Start Address (Full Address including street number)

 state postcode

Destination Address (Full Address including street number)

 state postcode

Journey ID and version number

Do you require a return trip?

- Yes No
 Laden Unladen

Route/Area Description (certain vehicle configurations may be restricted to routes only)

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Payment Details

Notes:

- Preferred payment is by credit card

Payment Method (tick one)

Credit Card

Cheque

(please make cheques payable to the National Heavy Vehicle Regulator).

A separate cheque is required for each application if choosing to pay by one of these types.

Payment Amount – \$70

If you wish to pay the application fee by Credit Card, please complete the details below

Card Type

Visa MasterCard American Express

Name on Credit Card (please print)

Card Number

Card Expiry

 /

CVV

Cardholder Signature

Date Signed

Contact Details

Send completed applications and supporting information with payment details by Mail or Fax to the details listed below.

Mail Access Management
National Heavy Vehicle Regulator
PO Box 30
Virginia Business Hub Qld 4014

Fax 1300 880 423

To contact the Access team

Phone Number 1300 MYNHVR (1300 696 487)
Standard 1300 call charges apply
Please check with your phone service provider

Office Hours 7:00am - 5:00pm (AEST)

Website www.nhvr.gov.au