



Application for First Issue/Replacement of NT Work Zone Traffic Management ID Card

Type of Application

First Issue
 Renewal
 Lost
 Stolen
 Damaged
 Change of Name - from:

Applicant Details

Surname Date of Birth / /
 Male Female
 Given Name(s) Residential Address
 Telephone (home) Telephone (business)
 State Postcode
 Telephone (mobile) Postal Address (if different to residential)
 E-mail Address State Postcode

Statement of Attainment Details

Registered Training Organisation No.	Course Code	Dated	Statement Number

Unattested Declaration

I declare, by virtue of 23D of the *Oaths Act*, the information provided in this application is true and correct in every particular. I consent to the Motor Vehicle Registry using and disclosing information from my records to Road Operations, Department of Construction and Infrastructure, for the purpose of management of the Workzone Traffic Management identity card and the associated training qualifications.

Note: A person wilfully making a false declaration is liable to a penalty of \$2,000 or imprisonment for 12 months or both.

Applicant's Name (print)
 Applicant's Signature
 Date / /

Privacy Statement

The information on this form and the digital photographic image is collected and stored by Motor Vehicle Registry, on behalf of Road Operations, Department of Construction and Infrastructure, for the purpose of issuing a Workzone Traffic Management identity card. The Registrar of Motor Vehicles adheres to the Department's privacy statement and the *Information Act*. Further information on Privacy can be found at www.nt.gov.au/dlp

Office Use Only

Evidence of Identity: Category A/B _____ Category A/B _____ Category A/B _____
 Evidence of Residency _____ Signature Checked User ID _____