

OFFICE USE ONLY



Department of Lands and Planning
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VS4

APPOINTMENT AS AN AUTHORISED INSPECTOR

- Applicant Interviewed
 References Attached
 Assessment Test(s)
 Driver Licence Check
 Qualifications Attached
 Premises Inspected
 Criminal History Release Attached

Applicant's Name: Examination Date:/...../.....
 Examination Place:

- Written Results: Pass Fail
 Verbal Results: Pass Fail
 Submitted Qualifications: Accepted Not Accepted

Comments on Examination:

- Recommendation:
 (a) To Be Granted
 Not Granted
 Renew
 Change of Premises

(b) Restrictions or Conditions to Apply:.....

CATEGORIES APPROVED TO INSPECT

- Compliance Checks - New Vehicles, Motorcycles or Trailers **(H)**
 Light Trailers Up To & Including 4.5 Tonne ATM **(F)**
 Vehicles Up To & Including 4.5 Tonne GVM **(A)**
 All Trailers **(G)**
 All Heavy Vehicles **(C)**
 Plant & Equipment **(D)**
 Motorcycles **(B)**
 Commercial Passenger **(E)**

 Vintage/Veteran **(V)**

- RECOMMENDED
 NOT RECOMMENDED

Signature Date/...../.....

- APPROVED
 NOT APPROVED

Registrar/Representative Date/...../.....

AUTHORISED INSPECTOR
NUMBER

Application for Appointment as an Authorised Inspector

NOTES FOR COMPLETING THIS FORM

- Applications must be supported by qualifications acceptable to the Department.
- It is the Department of Lands and Planning right to reject any application or to request further evidence to support an application.
- All applicants will be required to submit to a written examination(s).
- Applicants must hold a current applicable driver's licence in the class relevant for the authorisation required.
- All applicants will be required to undergo a current criminal history check.
- Applicants will be required to provide two written work related references.

- New
 Renewal
 Change of Premises
 Amendment of Category

1 APPLICANT DETAILS

Surname		Given Name(s)	
<input type="text"/>		<input type="text"/>	
Postal Address		Phone Number	Date of Birth
<input type="text"/>		<input type="text"/>	<input type="text"/>
		Driver's Licence Number	State
		<input type="text"/>	<input type="text"/>

2 EMPLOYER DETAILS

Surname		Given Name(s)	
<input type="text"/>		<input type="text"/>	
Business Name		Phone Number	
<input type="text"/>		<input type="text"/>	
Business Address		Postal Address	
<input type="text"/>		<input type="text"/>	

- Business Type: Service Station
 Repair Workshop
 Dealership

3 AUTHORISATION REQUIRED

- | | |
|---|--|
| <input type="checkbox"/> Compliance Checks - New Vehicles, Motorcycles or Trailers (H) | <input type="checkbox"/> Light Trailers Up To & Including 4.5 Tonne ATM (F) |
| <input type="checkbox"/> Vehicles Up To & Including 4.5 Tonne GVM (A) | <input type="checkbox"/> All Trailers (G) |
| <input type="checkbox"/> All Heavy Vehicles (C) | <input type="checkbox"/> Plant & Equipment (D) |
| <input type="checkbox"/> Motorcycles (B) | <input type="checkbox"/> Commercial Passenger (E) |
| | <input type="checkbox"/> Vintage/Veteran (V) |

4 DETAILS OF QUALIFICATIONS HELD (New Applicants Only)

Type	Certificate Number	Issue Date	State/Country Obtained	Granted by

5 JOB HISTORY (This section must be completed)

Employer	Commencement Date	Termination Date	Duties Undertaken

6 Please provide a sample of your workshop stamp and signature in the box below

Signature:

PRIVACY STATEMENT

The Registrar of Motor Vehicles is required to collect information for registrations, licences and permits under section 92 of the *Motor Vehicles Act*. The Registrar adheres to the Department of Lands and Planning Privacy Statement and the *Information Act*. Further information on privacy can be found at www.nt.gov.au/dlp

7 DECLARATION (Applicant)

I declare, by virtue of Section 23D of the *Oaths Act*, the information provided in this application is true and correct in every particular.

Note 1: A person wilfully making a false declaration is liable to a penalty of \$2,000 or imprisonment for 12 months, or both.

Note 2: I understand that if requested by the Department of Lands and Planning, I will provide a current criminal history check at my own expense.

.....
Signature of Applicant/...../.....
Date

8 DECLARATION (Employer/Proprietor of Applicant)

I declare, by virtue of Section 23D of the *Oaths Act*, the information provided by the applicant is true and correct in every particular.

Note 1: A person wilfully making a false declaration is liable to a penalty of \$2,000 or imprisonment for 12 months, or both.

Note 2: I agree to the above person being appointed as an Authorised Inspector (Motor Vehicles) at my premises and I understand my responsibilities.

.....
Signature of Employer/Proprietor of Applicant/...../.....
Date

9 RELEASE OF INFORMATION

I of hereby
Name Premises Name

Approve the Northern Territory Government to release and publish the following details:

1. Business Name
2. Business Address
3. Business Phone Number
4. Categories Approved to Inspect (Please tick if appropriate)
5. Child Restraint Assistance

.....
Signature of Employer/Proprietor/...../.....
Date