



**APPLICATION FOR REPLACEMENT REGISTRATION DETAILS CERTIFICATE,
REGISTRATION CERTIFICATE, LABEL OR UNREGISTERED VEHICLE PERMIT**

1. ABOUT THE OWNER

Surname / Body Corporate Name	Given Names	Client / Licence Number
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Residential (Home)/ Business Address

Number and Street	Suburb / Town	Postcode
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Postal Address (if different to above address)

Suburb / Town	Postcode
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2. PLEASE COMPLETE THIS SECTION TO APPLY FOR A REPLACEMENT CERTIFICATE OR LABEL

Make of Vehicle	Body Type	Plate Number
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(Please tick the appropriate boxes)

I hereby apply for a: Replacement Label (heavy vehicles only) Replacement Certificate Replacement Registration Details Certificate

The original document has been: Lost Destroyed Other

3. PLEASE COMPLETE THIS SECTION TO APPLY FOR A REPLACEMENT UNREGISTERED VEHICLE PERMIT

Current Permit Number (if known)	Commencement Time / Date : / /	Expiry Date / /	Vehicle Type (Vehicle, Motorbike, Trailer)
Make of Vehicle	Body Type	Plate Number	Office Use Only New Permit Number

(Please tick the appropriate box)

The original document has been: Lost Destroyed Other

4. DECLARATION BY OWNER (EVIDENCE OF IDENTITY MAY BE REQUIRED)

I declare that the information supplied by me in making this application is correct.

Personal Signature of Registered Owner(s)/Operator(s) Date...../...../.....

Lodge this form at any Service SA Centre

For further information telephone: 13 10 84 between 8am - 6pm Monday to Friday www.sa.gov.au ABN 92 366 288 135