



APPLICATION TO ALTER VEHICLE OR TRAILER DETAILS

PLEASE WRITE CLEARLY IN BLOCK LETTERS

Client Number

1. ABOUT THE OWNER

Surname/Body Corporate Name Given Names

Residential (Home) / Business Address

Number and Street Suburb / Town Postcode

Postal Address (if different to above Address)

Number and Street Suburb / Town Postcode Your daytime phone number (if convenient)

2. ABOUT THE VEHICLE (PRIOR TO ALTERATION)

Plate No. Make: Model:

Body Type: Month / Year of Manufacture Seating Capacity

Is this Vehicle Left Hand Drive? Yes No Was this vehicle originally manufactured as a Left Hand Drive? Yes No

Engine Number: Engine Make:

VIN / Chassis:

Engine Capacity: litres Number of Cylinders/rotors:

Was the engine turbocharged or supercharged? Yes No Rotary Engine Yes No

Is the vehicle fitted with a Speed Limiting Device? Yes No Type of Fuel

Transmission type: Automatic Syncromesh Non Syncromesh (Crash Box)

3. ABOUT THE ALTERATION — Please complete the appropriate sections

New Engine Number Make. Model of Engine Engine Capacity cc Number of Cylinders / rotors Fuel Type Brakes fitted (Disc or Drum) Front Rear

New Colour New Mass (Weigh note required) kg GVM / GTM Seating Capacity

Have the brakes been upgraded? Yes No if yes, give details overleaf

ADDITIONAL ENGINE DETAILS

Has the fuel system, engine management system or engine been modified from the original manufacturer's specifications? Yes No

Have after market components been fitted? Yes No

DETAILS REQUIRED FOR TRAILERS

No. of Road Tyres No. of Axles

Tyres: Size

Tyres: Ply

If you have answered, "YES" to any of the above questions or modified / altered the vehicle, please provide details overleaf:→

Is the engine fuel injected? Yes No Is the engine supercharged? Yes No Is the engine turbocharged? Yes No

If alteration is to the seating or a conversion to a leisure type vehicle, please complete information overleaf →

Signature of Applicant Date

OFFICE USE Form lodged at Office

ADDITIONAL INFORMATION FOR ALTERATIONS MADE TO YOUR VEHICLE

Five horizontal lines for handwritten notes.

LEISURE VAN, CAMPERVAN, SEATING CAPACITY

To be registered as a Non-Commercial Van, alterations to the vehicle must be that insufficient area remains for goods carrying.

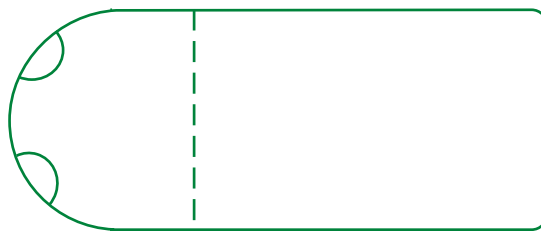
Alterations necessary could include:

- Additional approved seating
- Sufficient height for an adult to stand and move about
- Sufficient windows for internal light and ventilation
- Permanent sleeping accommodation for one or more persons
- Fixed cupboards and /or wardrobes
- Bench or fixed table for eating purposes

THESE VEHICLES MUST BE:-

- **INSPECTED BY AN OFFICER AT ANY CUSTOMER SERVICE CENTRE IF APPLICABLE.**
- **WEIGHED AND A WEIGHNOTE SUPPLIED TO ANY CUSTOMER SERVICE CENTRE IF APPLICABLE.**
- **IF CHANGES HAVE BEEN MADE TO THE SEATING CAPACITY, THE VEHICLE MUST BE INSPECTED BY THE VEHICLE SERVICES SECTION OF THE DEPARTMENT, KATEENA ST, REGENCY PARK FOR AUSTRALIAN DESIGN RULE COMPLIANCE AND ANY APPLICABLE SAFETY REQUIREMENTS, TELEPHONE 13 10 84 TO ORGANISE A BOOKING**

**PLEASE
SKETCH
ALTERATIONS**



Name of company or person who performed conversion

Three horizontal dotted lines for handwritten text.

**DEPARTMENTAL INSPECTION
FOR OFFICE USE ONLY**

I have inspected the abovementioned vehicle and found it to be in accordance with the details declared above.

I classify the vehicle to be a _____

Name of Approving Officer.....	Signature of Approving Officer.....	Date/...../.....	Customer Service Centre.....
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