



APPLICATION TO CHANGE A PLATE NUMBER/ SLOGAN ON A VEHICLE REGISTRATION

MR45 04/23

1. ABOUT THE APPLICANT

SURNAME / BODY CORPORATE NAME		GIVEN NAMES		CLIENT / LICENCE NUMBER	
OTHER APPLICANTS (if jointly owned)		GIVEN NAMES		CLIENT / LICENCE NUMBER	
HOME/BUSINESS ADDRESS		SUBURB/TOWN		POSTCODE	PHONE
POSTAL ADDRESS (if different to above)		SUBURB/TOWN		POSTCODE	EMAIL

2. VEHICLE DETAILS

**Current Plate Number**  **VEHICLE MAKE**  **BODY TYPE**

The current plate number has been reported as lost or stolen  Yes  No **REPORT NUMBER**

3. NEW PLATE DETAILS

Please indicate the type of number that is to replace the existing number.

- Alpha-Numeric
- Heavy Vehicle
- Other
- Premium
- Personalised
- Euro
- Custom

Please specify:

**New Plate Number**

**Signature**

**Date**