



## Insurance Details

Compulsory Third Party (CTP) motor vehicle injury insurance is mandatory for all registered vehicles in South Australia, with coverage provided by a number of Government approved insurers.

**Upon presentation of this application you will receive information to assist you in selecting a CTP insurer for your vehicle.** A CTP insurer will be automatically assigned to a brand new vehicle. Find out more at [www.ctp.sa.gov.au](http://www.ctp.sa.gov.au).

Your personal information is collected by the State, the insurer underwriting your CTP insurance policy and other CTP insurers. For details about how your personal information will be handled see <https://www.ctp.sa.gov.au/resources/your-privacy>.

CTP Insurer

Will the vehicle be used for hire, fare or reward? YES ☐ NO ☐ Will the vehicle be used for ridesharing? YES ☐ NO ☐

Vehicle purchase price or market value, whichever is higher

Are you entitled to concession?  
E.g. Commonwealth pensioner  
Application form will be required

YES ☐ NO ☐

Will the vehicle be used seasonally? YES ☐ NO ☐

## PENALTIES APPLY FOR UNDER DECLARATION OF VALUE

### Vehicle details

Is the vehicle new or used?	Main colour	Secondary colour (if applicable)
<input type="text"/>	<input type="text"/>	<input type="text"/>

Is the vehicle modified from its original design, an individually constructed vehicle, or an imported used vehicle? YES ☐ NO ☐

Is the vehicle left hand drive? YES ☐ NO ☐

Engine number (not required for trailers)	Odometer reading	Vehicle mass*	Gross trailer mass (where applicable)	Model
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

\* Vehicle mass is not required for light passenger vehicles with a seating capacity of less than 13 persons including the driver.

Seating capacity	Number of cylinders (CC for motorcycles)	Fuel type E.g. Petrol, Gas, etc	Number of axles	Number of tyres
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

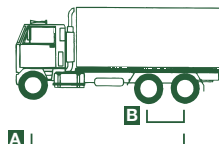
### Heavy Vehicles

Complete the following information only if your vehicle has a gross vehicle mass of over 4,500kg, or has a gross trailer mass of over 4,500kg, otherwise go to 'Declaration'.

Refer to Heavy Vehicle configuration info sheet (MR80) for assistance in completing this section.

Transmission type AUTOMATIC ☐ SYNCROMESH ☐ NON-SYNCROMESH (Crash Box) ☐

Is the vehicle fitted with a speed limiting device? YES ☐ NO ☐



Gross Vehicle Mass / Gross Trailer Mass	Gross Combination Mass (vehicles only)	Vehicle configuration	Engine Make	Engine Capacity (Litres)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Steering position Right hand ☐ Left hand ☐ Central ☐ Dual ☐ Skid ☐ Articulated ☐ Clutch ☐

Front Axle(s)				Rear Axle(s)				(A)	(B)	
Number tyres 1st front axle	Number tyres 2nd front axle	State whether the axle group is load sharing (L or N)	Measurement of internal axle spacing	Number of tyres in 1st axle group rear	Number of tyres in 2nd axle group rear	Number of tyres in 3rd axle group rear	Number of tyres in 4th axle group rear	State whether the axle group is load sharing (L or N)	Overall wheelbase	Rear axle spacing
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### Declaration

Name of person completing this report if different from applicant	Client/licence number
<input type="text"/>	<input type="text"/>
Dealership name (if applicable)	Client/licence number
<input type="text"/>	<input type="text"/>

I declare that the particulars shown on this application and any accompanying document(s) are true and correct. Where applicable, I acknowledge that this application also fulfils the purpose of being a report required under section 23A of the *Motor Vehicles Act 1959* (new vehicles only). I consent to my information being checked with the document issuer or official record holder via third party systems for the purpose of confirming my identity.

Signature of applicant

Date