

Authority to act as an agent (for registration)

This form can be used to authorise an agent or company representative to act on behalf of a registered operator.

Please complete this form and sign below. Please print clearly in ink using BLOCK letters and cross where applicable. You need to provide original documents for evidence of identity if you do not provide an existing Victorian photo licence or learner permit or confirmed client number. For more information visit vicroads.vic.gov.au/evidenceofidentity

Registered operator details (to be completed by	the registered operator)	Victorian licence/custor	mer no.*							
Individual Company Previous name(s) (if applicable)										
Surname or company name										
First given name or ACN/ARBN	Second given name									
Third initial (if any)		Date of birth D D M M Y Y Y								
Residential (or company) address		Date of Silai					code			
Postal address (if different from above)						code				
Garage address (if different from residential or company add	Postcode									
Mobile phone no. (or other if not applicable) Email							b - d -			
*Please provide your Victorian licence/ permit/ client number — You will have a client number with VicRoads if you have held a Victorian licence or learner permit or have had a vehicle registered in your name in Victoria.										
Agent or company representative's personal details										
Surname		Given name								
Position of company representative (if applicable)	,	Victorian Licence/Permi	it/Client no.							
Authorised activities										
Specify details of types of transactions that can be performed on behalf of the registered operator. You can limit activities to specific vehicles if required (specify in <i>Other details</i> section). An authorisation for an individual remains valid for one month; and for a company valid for one year, unless revoked sooner. To revoke authorisation, notify VicRoads in writing or nominate a new agent using this form.										
Yes No Register vehicles		Other details								
Yes No Transfer vehicle registrations										
Yes No Assign number plates										
Yes No Cancel registration/Apply for re										
Yes No Obtain duplicate certificates										
Yes No Specify common expiry/Pay registration renewal										
Registered operator's signature										
I hereby authorise the agent/company representative above to undertake the specified authorised activities in the registered operator's name. By signing this form, I declare that all information and/or documents provided by me is true and correct and I understand the privacy statement.										
	i/or documents provided b	y lile is true allu cor	rect and re		stanu ui	e priv	acy St	atement	•	
Signature of registered operator				Date			• M	M • Y		
Privacy statement										
Personal information VicRoads collects from you may be used by VicRoads, as permitted by the <i>Road Safety Act 1986</i> and the <i>Marine Safety Act 2010</i> . VicRoads may disclose personal information it collects from you to various organisations and persons as permitted by law, particularly by the <i>Road Safety Act 1986</i> . This includes disclosing the information to contractors and agents of VicRoads, law enforcement agencies, other road and traffic authorities, Austroads, the Transport Accident Commission, vehicle manufacturers (for safety recalls), road safety researchers, courts and other organisations or people authorised to use the personal information.										
You are required to provide this personal information. Failure to provide the information may result in this form not being processed, or records not being properly maintained.										
For further information about our use of your personal information and your right of access to it, see VicRoads brochure Protecting your privacy or contact VicRoads on 13 11 71. Providing false and/or misleading information or documents is a serious offence under the <i>Road Safety Act 1986</i> and/or <i>Marine Safety Act 2010</i> and can result										
in you being fined or imprisoned. Any authority or appro By signing this form, I declare that the information in this form	val, given as a result of you	providing such infor	mation/doc	ument	s, may l	oe rev	ersed a	and have	no effect	t.
OFFICE USE ONLY										
Agent or company representative's personal evidence of identity (original documents only)										
Category A evidence Australian photo licence Australian birth certificate Passport Other (specify document type)										
Origin (state/country) Reference no.			Date of expi	iry			M	M Y	Υ	/ Y
Category B evidence Document type			Reference n							
Signature of authorised officer	,,		er (if required							
Name of authorised officer		Name of manager (if required)								
Ilser ID		Date								