# **HEAVY VEHICLE CERTIFICATIONS PTY LTD**

ENGINEERING DESIGN SERVICES ROAD VEHICLE INDUSTRY & ADR CONSULTANTS (ABN: 63 161 706 887) 8 LEVEY RISE WINTHROP WA 6150 AUSTRALIA PH: (61-8) 9332 2030, (61-8) MOBILE: 0412 45 65 45 (calls only) info@hvc.net.au www.hvc.net.au

### VIN Application Form

#### NOTE: ALL trailers now need federal certification. Without that the VINs are not loaded and cannot be licensed.

### Manufacturer's details:

| Approval Name  |     |       |  |
|----------------|-----|-------|--|
| Trading Name   |     |       |  |
| ACN            |     |       |  |
| Address        |     |       |  |
| Contact Person | Mob | Email |  |
|                |     |       |  |

## Trailer details:

| Reference: |
|------------|
|------------|

| Trailer Category                        |               | Trailer Type                     |
|---|---------------|----------------------------------|
| TA – Very Light Trailer (GTM 750kg max) | P – Pig/Dolly |                                  |
| TB – Light Trailer (GTM 3.5kg max)      |               |                                  |
| TC – Medium Trailer (GTM 10.0t max)     | S – Semi      |                                  |
| TD – Heavy Trailer (GTM over 10.0t)     |               |                                  |
|   | D – Dog       |                                  |
|   |               | $\underline{0}$ $\underline{00}$ |

#### Please complete below:

| Category (TA, TB, TC, TD) | Type (P, S, D) | Approval No | Variant No | Quantity of VINs |
|---------------------------|----------------|-------------|------------|------------------|
|                           |                |             |            |                  |
|                           |                |             |            |                  |
|                           |                |             |            |                  |
|                           |                |             |            |                  |
|                           |                |             |            |                  |
|                           |                |             |            |                  |
|                           |                |             |            |                  |
|                           |                |             |            |                  |

Name

\_\_\_\_\_

Signature

Date

### When complete please email this form to info@hvc.net.au

Office Use Only:

| WMI | Job No. | Entered By |
|-----|---------|------------|
|     |         |            |
|     |         |            |
|     |         |            |