

General information

This form is for operators seeking to establish accreditation within the Mass, Maintenance or Fatigue Management modules of the National Heavy Vehicle Accreditation Scheme (NHVAS).

Do not use this form if you are already an accredited operator and you want to add additional modules to your existing accreditation.

For more information on Mass, Maintenance or Fatigue Management refer to the NHVR website or call the NHVR contact centre. You'll find contact information within this form.

Before you begin:

- Implement a compliance management system in your business.
- Prepare supporting documentation.
- Engage a third party auditor to perform an NHVAS entry audit. All third party auditors must be certified with RABQSA to conduct NHVAS audits. For fatigue modules the auditor must have fatigue scope.
- Collect relevant submission documents and forms.

Forms checklist

Signed Independent National Heavy Vehicle Accreditation Audit Report

For applicants of Mass Management Accreditation

- Completed vehicles list for those vehicles entering Mass Management Accreditation
- Compliance History Declaration Form (CHD1) for operator and all associates

For applicants of Maintenance Management Accreditation

- Completed vehicles list for those vehicles entering Maintenance Management Accreditation
- Compliance History Declaration Form (CHD1) for operator and all associates

If you are adding vehicles to mass and/or maintenance you will need to provide proof of vehicle roadworthiness and/or suspension compliance (if applicable). Please see the [Inspection Requirements for NHVAS](#) document on the NHVAS website for full details.

For applicants of Basic Fatigue Management Accreditation (BFM)

- Compliance History Declaration Form (CHD1) for operator and all associates
- Nominated drivers list

For applicants of Advanced Fatigue Management Accreditation (AFM)

- Compliance History Declaration Form (CHD1) for operator and all associates
- Nominated drivers list
- AFM Fatigue Management System (proposed work schedules)
- Safety Case (AFM) if applicable

Privacy Statement

The NHVR is collecting your personal information to establish accreditation within the Mass, Maintenance or Fatigue Management modules of the National Heavy Vehicle Accreditation Scheme under Chapter 8 of the Heavy Vehicle National Law Act. We are authorised under this Act to collect information we reasonably require to decide this application.

We may disclose protected information contained in your application for the purposes set out in section 727 of the Act to an entity (including a private or public sector entity) identified in that section. This can include disclosure to an authorised employee or agent of the entity.

We may disclose protected information to a law enforcement agency, including a service provider authorised to enforce the Heavy Vehicle National Law nationally. A police agency may disclose protected information disclosed to or otherwise held by it to another police agency authorised to hold protected information.

Accredited operator details

Applicant's name (must be company or individual)

Jurisdiction client number/Driver licence number (see note*)

Australian Company Number (ACN) (ACN is not required for individuals)

Trading as name (if applicable)

Registered company address (or business address for individual)

 State Postcode

Primary physical operating address (where audits are to be performed)
Capture additional physical operating addresses in the NHVAS Additional Information Spreadsheet.

 State Postcode

Operator postal address

 State Postcode

Jurisdiction of accreditation

Enter the jurisdiction appropriate to your registered company address (or business address for individuals)

Primary contact person's details

Capture additional primary contact person's details in the NHVAS Additional Information Spreadsheet.

Title Contact name (must have authority to act on behalf of the operator)

Title / position

Business phone number

Business fax number

Mobile phone number

Email address

Preferred method of contact (please select one only)

- | | |
|---------------------------------|--------------------------------|
| <input type="checkbox"/> Phone | <input type="checkbox"/> Email |
| <input type="checkbox"/> Fax | <input type="checkbox"/> Post |
| <input type="checkbox"/> Mobile | |

Third party consent

I nominate the person below to act on my behalf in regard to this application and to release information to this person relating to my accreditation scheme.

Name of nominated person

Company (if applicable)

Business phone number

Business fax number

Mobile phone number

Email address

Preferred method of contact (please select one only)

- | | |
|---------------------------------|--------------------------------|
| <input type="checkbox"/> Phone | <input type="checkbox"/> Email |
| <input type="checkbox"/> Fax | <input type="checkbox"/> Post |
| <input type="checkbox"/> Mobile | |

**Note: For an individual, Evidence of Identity (EOI) appropriate for a vehicle registration or driver licensing transaction carried out in that jurisdiction.*

Accredited operator declaration

I hereby declare that all details provided in this application are true and correct. Making a false statement to the NHVR may attract significant penalties under section 701 of the Heavy Vehicle National Law.

Applicant's name Third party

Applicant's name

Title / position

Applicant's signature

If providing an electronic signature please consent to the following:

I accept the electronic signature has the same status as a signed signature.

I consent to the NHVR obtaining my prescribed criminal history as per section 460 of the Heavy Vehicle National Law. I understand that my application will not proceed if I do not give this consent or withdraw this consent at a later time.

PRIVACY STATEMENT

Date signed

 / /

The full privacy statement can be read in full on page 1.

NHVAS accreditation module selection

For which NHVAS accreditation modules do you wish to apply? (select all that apply)

Mass Management

Maintenance Management

Fatigue Management

For Fatigue Management, select the type:

Basic (BFM)

Advanced (AFM)

For Mass and/or Maintenance, you must also complete the [Vehicles under Mass and/or Maintenance Management](#) section and [Drivers under Fatigue Management](#) section.

Accreditation establishment calculator

Establishing module fees

Enter the applicable module/s

A1

Enter in the application fee for the module/s

A2

Establishing fees for vehicles

Take note of the [Schedule 1 Fees](#) table and include the relevant fees in the table below.

	Number of vehicles	Price per vehicle		Number x price
Adding a vehicle to Mass Management			A3	
Adding a vehicle to Maintenance			A4	
Adding a vehicle to Mass and Maintenance			A5	

Calculate the total of A3, A4 and A5, and write this amount in A6.

Subtotal A6

Calculate the total of A2 and A6, and write this amount in P1.

Application total P1

Use the value in P1 as the payment amount in the [Payment details](#) section.

Schedule 1 Fees

Establish accreditation module pricing

Single accreditation module	
Mass	84.00
Maintenance	84.00
Basic Fatigue (BFM)	84.00
Advanced Fatigue (AFM)	127.00
Multiple accreditation modules	
Mass + Maintenance	168.00
Mass or Maintenance + Basic Fatigue (BFM)	168.00
Mass or Maintenance + Advanced Fatigue (AFM)	211.00
Mass + Maintenance + Basic Fatigue (BFM)	252.00
Mass + Maintenance + Advanced Fatigue (AFM)	295.00

Establish accreditation vehicle pricing

Vehicle operating under	
Mass Management	27.00
Maintenance Management	27.00
Mass + Maintenance Management	54.00

DO NOT COMPLETE THIS PAGE IF SUBMITTING ONLINE

Payment details

Submit completed applications and supporting information with payment details online or by mail, fax or email as listed below:

Notes:

- Preferred payment is by credit card.
- Do not provide payment details if the amount entered at P1 is \$0.00.

Payment method (tick one)

- Credit card
 Cheque

Payment amount

Use the [Accreditation Establishment Calculator](#) and include amount:

P1

If you wish to pay the application fee by credit card, please complete the details below:

Card type

- Visa MasterCard American Express

Name on credit card (please print)

Card number

Card expiry

CVV

Cardholder signature

If providing an electronic signature please consent to the following: I accept the electronic signature has the same status as a signed signature.

Date Signed

Contact details

Send completed applications and supporting information with payment details by mail or fax.

- Online www.nhvr.gov.au/forms/submission-form
- Mail Accreditation
 National Heavy Vehicle Regulator
 PO Box 492
 Fortitude Valley QLD 4006
- Fax 1300 736 798
- Email forms@nhvr.gov.au

To contact the NHVR Accreditation Team:

- Call 1300 MYNHVR (1300 696 487)
 Standard 1300 call charges apply
 Please check with your phone service provider
- Visit www.nhvr.gov.au