



(For a Vehicle to Exceed the Statutory Mass and / or Dimension Limits)

LODGEMENT INFORMATION for DPTI - Vehicle Permits

On-line Permit Lodgement: www.ezyreg.sa.gov.au
In Person: Department of Planning, Transport and Infrastructure
Kateena Street, Regency Park SA 5010
By Post: DPTI - Vehicle Permits, PO Box 2526 Regency Park SA 5942
Facsimile: (08) 8348 9551 or (08) 8348 9556

Enquiries and Information:

Telephone: 1300 882 249
Email: dpti.vehiclepermits@sa.gov.au
Website: www.sa.gov.au/heavyvehicles

ABN: 92 366 288 135 MR448 11/11

Important Notes (Please read prior to completing this application)

- Incomplete or false information will render this application void
- This application is required to be completed only ONCE for each vehicle
- A copy of the current *registration certificate* must accompany this application
- Application forms must be accompanied by payment

Do you require this vehicle to be listed for excess mass operation? (Includes vehicles with a GCM greater than 42.5 tonnes)

(Please place a cross in the appropriate box)

- Yes:** Please complete all Sections
(Please supply a Manufacturers Rating letter where possible)
- No:** Please complete **Sections A, B, C, E & F** only

SECTION A - REGISTERED OWNER'S DETAILS (Please use CAPITAL/BLOCK letters)

SA Client Number (Contact the Vehicle Permit Section if you require assistance in obtaining a Client Number)

Registered Owner

Residential Address

Suburb State P/code

Postal Address

Suburb State P/code

Contact Name

Contact Number () Fax Number ()

Email Address

SECTION B - VEHICLE DETAILS (Please use CAPITAL/BLOCK letters)

Make Model

State of Registration Registration Number Month & Year of Manufacture

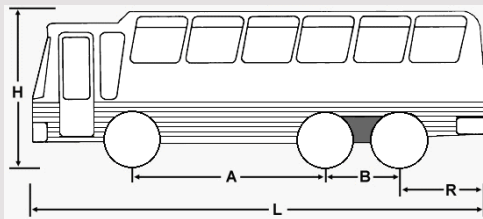
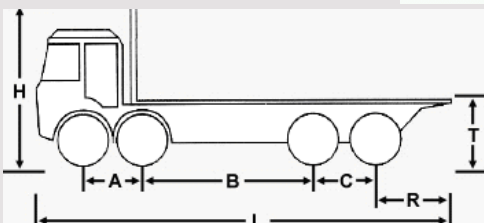
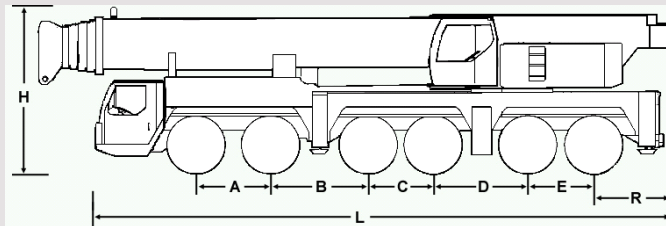
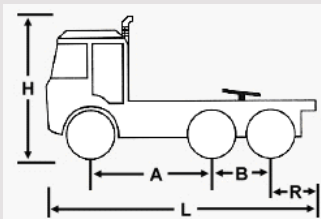
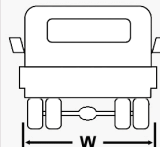
Engine Number

VIN/Chassis Number

Federal Interstate Registered Vehicle? Yes No What is the driver's position? Left Centre Right

SECTION C - VEHICLE TYPE, DIMENSION & AXLE SPACINGS

- Please state measurements in **metres**, accurate to 2 decimal spaces
- Cross out or add wheels to the diagrams as necessary
- Insert the number of tyres per row in the wheel circles, e.g. **4**



| DIMENSIONS | | | |
|------------|----------------------|---|------------------------|
| H | <input type="text"/> | . | <input type="text"/> m |
| W | <input type="text"/> | . | <input type="text"/> m |
| L | <input type="text"/> | . | <input type="text"/> m |
| R | <input type="text"/> | . | <input type="text"/> m |
| T | <input type="text"/> | . | <input type="text"/> m |

| AXLE SPACINGS | | | |
|---------------|----------------------|---|------------------------|
| A | <input type="text"/> | . | <input type="text"/> m |
| B | <input type="text"/> | . | <input type="text"/> m |
| C | <input type="text"/> | . | <input type="text"/> m |
| D | <input type="text"/> | . | <input type="text"/> m |
| E | <input type="text"/> | . | <input type="text"/> m |

OTHER (please specify)

If you specified 'OTHER' as the vehicle type, please supply a separate diagram or specification sheet

SECTION D - MECHANICAL DETAILS (Please place a cross in the appropriate box)

Has the vehicle been altered or modified? (Refer to Vehicle Information Bulletin VSB 6) No Yes (Please provide an Engineers letter)

1. ENGINE

Make Model
No. of Cylinders Max Net Power kW @ RPM
Capacity . litres Max Net Torque Nm @ RPM

2. STEER AXLE/S

Make Model Rated Capacity . tonnes
No. of Axles Tyres per Axle

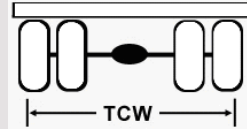
SUSPENSION

Make Model Rated Capacity . tonnes

TYRES

Size Ply/Load Index

Overall Tyre Contact Width (TCW measured in metres where the tyres contact the ground) .



3. DRIVE AXLE/S

Make Model Rated Capacity . tonnes
No. of Axles Tyres per Axle GCM . tonnes
Are all axles in this group driven? Yes No Ratio . : .

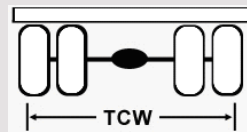
SUSPENSION

Make Model Rated Capacity . tonnes

TYRES

Size Ply/Load Index

Overall Tyre Contact Width (TCW measured in metres where the tyres contact the ground) .



4. TRANSMISSION

Make Model
Ratios Top : Bottom : Number of Forward Speeds

AUXILIARY TRANSMISSION (if fitted)

Make Model
Ratios Top : Bottom : Number of Forward Speeds

5. VEHICLE MASS DETAILS

Vehicle PLATED GVM . tonnes GCM . tonnes

Manufacturer's RATING (if different from above) GVM . tonnes GCM . tonnes

(For "Manufacturers RATING" GVM & GCM, please provide a RATINGS LETTER from the Manufacturer)

SECTION E - DECLARATION

I declare that:

- All of the information contained on this application is true and correct.
- The information contained in this application may be disclosed or used for any investigations in accordance with the *Road Traffic Act 1961*.
- I understand that additional charges may be incurred should DPTI need to undertake activities such as route survey, bridge assessments, load inspection, etc. to determine this application.

Signature of operator or authorised agent

- -

Date

SECTION F - PAYMENT ADVICE

If you do not have a credit card, you must attach the fee to this application

Please charge the fee for this application to my:

Mastercard VISA Cheque Attached

Credit Card No.

Expiry Date

-

CVV (from rear of card)

Cardholder Name

Signature of Cardholder