

Please complete the **white** sections of this form and sign below. Please print clearly in ink using BLOCK letters.

Release of Information to a Third Person

Your Personal Details

Surname										Given Name(s)																	
Company Name and ACN <i>(if applicable)</i>																											
Home <i>(or company)</i> Address																											
															Postcode												
Garaged Address <i>(if different from above)</i>																											
															Postcode												
Home Phone										Work Phone																	
Date of Birth										D	D	M	M	Y	Y	Y	Y	Driver's Licence No									
Registration Number																		VIN No									

Hereby Consent to Release *(records kept by VicRoads)*

Registration Licence **Note:** Licence details include any convictions or other information recorded against my name relevant either in Victoria or elsewhere,

to:

Surname										Given Name(s)														
Company Name, Organisation or Agency																								
Address																								
															Postcode									
Contact Name										Contact Phone										Fax Number				
Account Number										Reference														

Deed of Indemnity

In consideration of VicRoads releasing details of any convictions or other information recorded against my name, I hereby indemnify VicRoads, it's servants and agents against all liability and against all actions, suits, proceedings, claims, demands, costs and expenses whatsoever, which may be taken or made in respect of the release or use hereunder of any details of any conviction or other information purporting to either relate to or involve me. I hereby consent to release the information to the interested party.

All the information provided is true and correct. Any information given or document submitted with this application, or a copy of such application may be disclosed or used for investigation, law enforcement and other purposes in accordance with the Road Safety Act.

This authorisation is valid for twelve (12) months from date of signing.

Signature of Record Holder being Searched										Signature of Witness																	
										Printed Name of Witness																	
Date										D	D	M	M	Y	Y	Y	Y	Licence Number of Witness									