



Application for Compulsory Third Party Insurance Visiting Vehicle or Trailer

Surname(s)/Company Name

Date of Birth

Given Name(s)

Contact Telephone Number

Address for service

..... State Postcode

Details of Vehicle / Trailer

Registration Number

Country / State of Issue

Registration Expiry Date

Make

Model

Body

GVM or ATM

Number of Axles

Configuration

(for heavy and multi-combination trsilers)

I/We will be visiting the Northern Territory between the dates shown below, and request that the Territory Insurance Office provide Compulsory Third Party Insurance for that period.

Date of Entry

Date of Exit

Important Note: A separate form is required for each vehicle

Declaration

I/We, the undersigned, hereby declare that the above details are true and correct in every particular, and I/We have read and understood the *Privacy Statement* on the rear of this form.

Applicants Signature

Date

Applicants Signature

Date

Office Use Only

Configuration code

CTPI Fees Paid

CTPI Insurance Category

User ID / Name

Privacy Statement

The Registrar of Motor Vehicles is required to collect information for Registrations, Licenses and Permits under section 92 of the NT *Motor Vehicles Act*. The Registrar adheres to the Department of Planning and Infrastructure's Privacy Statement and the *Information Act*. Further information on privacy can be found at www.dpi.nt.gov.au
