

Motor Vehicle Registry Information Bulletin

V63 Complaints Reporting – Commercial Passenger Vehicle

Effective Date: 25 March 2008

Introduction

The Department uses a complaints process to assist in monitoring Commercial Passenger Vehicle (CPV) drivers and operators.

What is a CPV Complaint

A complaint is an expression of dissatisfaction with a service offered or provided by CPV drivers and / or operators.

Things to Know About Complaints

- Any person may make a complaint.
- Only substantiated complaints will be investigated.
- The Department may forward a complaint to other organisations for further investigation – i.e. Police, Anti Discrimination or Office of Fair Trading.
- A complainant and witness may be required to give evidence in Court.
- Where more than six months has lapsed since the date of the incident, prosecution action may not be possible.

Complaint Form

To assist in making a complaint, form VS28 – “Complaint Report – Commercial Passenger Vehicles (CPV)” is attached to this Bulletin.

What is the Process

A complaint can be forwarded to the Accreditation and Audit Unit using the contact details below.

Contact Details	
Motor Vehicle Registry	
Telephone	1300 654 628
Facsimile	(08) 8999 3103
Email	mvr@nt.gov.au
Web	www.mvr.nt.gov.au
Postal Address	GPO Box 530 Darwin NT 0801

THIS PAGE IS INTENTIONALLY LEFT BLANK FOR BACK TO BACK PRINTING PURPOSES.



Northern Territory Government

Department of Planning and Infrastructure

All Correspondence to:
GPO Box 530
DARWIN NT 0801

Phone: 1300 654 628
Fax: (08) 8999 3101
Email: mvr@nt.gov.au
Website: www.mvr.nt.gov.au

Office Use Only

Region

Date Received

Referral

VS28

Complaint Report - Commercial Passenger Vehicles (CPV)

Person Submitting Report

Name	Telephone Number	Fax Number
<input type="text"/>	() <input type="text"/>	() <input type="text"/>
Postal Address	Mobile Telephone Number	
<input type="text"/>	<input type="text"/>	
<input type="text"/>	Email Address	
State <input type="text"/>	<input type="text"/>	
Postcode <input type="text"/>		
Signature	Date	
<input type="text"/>	<input type="text"/>	

Complaint Details

Vehicle Registration Number	Vehicle Type	Name of Company
<input type="text"/>	<input type="text"/>	<input type="text"/>
Day	Date	Time
<input type="text"/>	<input type="text"/>	<input type="text"/>
Location		Drivers's Name and/or ID Number (if known)
<input type="text"/>		<input type="text"/>

Reporting Action

Has this matter been reported?

Police	Yes <input type="checkbox"/> No <input type="checkbox"/>	Date	<input type="text"/>
Promis Number	<input type="text"/>	Company/Operator	Yes <input type="checkbox"/> No <input type="checkbox"/>
Officer Name	<input type="text"/>	Person's Name	<input type="text"/>
Location	<input type="text"/>	PositionTitle	<input type="text"/>
Action Taken	<input type="text"/>	Action Taken	<input type="text"/>

