




## Application for Commercial Passenger Vehicle (CPV) ID Card

### Type of Application

 New

 Renewal

 Replacement

### Applicants Details

Surname

Given Name(s)

Date of Birth

 /  / 

Residential Address

  
  
 *Postcode*

Postal Address

  
  
 *Postcode*

Contact Phone Number

Driver Licence Number

Expiry Date

 /  / 

Class(es)

Conditions

Endorsements

### Application Details

CPV Card Required

 Provisional

 Open

 Replacement

CPV Category Required

 Taxi

 Minibus

 Private Hire Car

 Limousine

 Other *(please specify)*


Area of Operation

 Alice Springs

 Darwin

 Gove

 Katherine

 Tennant Creek

 Yulara

### Current Details *(if applicable)*

Current CPV ID No

Condition(s)

Area of Operation

Current CPV ID Category

### Training Details *(Complete this section if you are applying for a Provisional ID Card)*

Registered Training Organisation

Start Date

 /  / 

Completion Date

 /  / 

Name of Instructor

Signature of Instructor

### CPV Operator and Communication Network Support

*(Complete this section if you are applying for a Provisional ID Card)* I/We support the applicant named on this form to undertake driver training.

Name of CPV Operator

Signature of CPV Operator

Operator Accreditation Number

Date

 /  / 

Name of Communications Network

Signature of Network Manager

Name of Network Manager

Date

 /  /

### CPV Operator Details (complete this section if you are applying for open ID Card)

Surname

Given Name(s)

Postal Address

  
  
  
Postcode

Types of Vehicles Driven by Driver

Number of Hours Driven by Driver

Date training started

Date training completed

Comments

Operator Accreditation No

Vehicle Type

- Taxi  
 Minibus  
 Private Hire Car  
 Limousine

I **\*support / \*do not support** the application of the person identified in *Customer Details* above. Further, I have read the **Important Information** on the front of this form and consent to the disclosure of the information I have provided. *\*delete not applicable*

Signature of CPV Operator

Date

### Communication Network Details (complete this section if you are applying for open ID Card)

Name of Communications Network/CPV Operator

Postal Address

  
  
  
Postcode

Types of Vehicles Driven by Driver

Number of Hours Driven by Driver

Date training started

Date training completed

Comments

I **\*support / \*do not support** the application of the person identified in *Customer Details* above. Further, I have read the **Important Information** on the front of this form and consent to the disclosure of the information I have provided. *\*delete not applicable*

Name of Network Manager/CPV Operator

Signature of Network Manager/CPV Operator

Date

### Unattested Declaration

I, (Applicant's Full Name) \_\_\_\_\_, do solemnly and sincerely declare, by virtue of Section 23D of the Oaths Act, conscientiously believing the statements contained in this declaration to be true in every particular.

Declared at \_\_\_\_\_ the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
(Location) (Day) (Month) (Year)

\_\_\_\_\_  
(Signature of applicant)

#### Note:

A person wilfully making a false statement in a declaration is liable (Applicants Signature) to a penalty of \$2000 or imprisonment for 12 Months or both.

### Important Information

The Director of Commercial Passenger (Road) Transport (the Director) collects the information on this form to determine whether or not you are eligible to apply to be the holder of a Commercial Passenger Vehicle Identification (CPVID) Card in accordance with the provisions of the *Commercial Passenger (Road)Transport Act*. The name of the applicant listed in this form who is the driver of a Commercial Passenger Vehicle will be displayed on the CPVID Card that is issued by the Director. The Director collects personal information in accordance with the Department of Planning and Infrastructure's privacy statement, available at <http://www.nt.gov.au/dpi/> and adheres to the privacy legislation contained within the *Information Act*.

### Office Use Only

#### All Applications

- Current NT Driver Licence  
 "h" Endorsement  
 2 Years Driving Experience  
 21 Years of Age

#### Provisional

- Stage 1 (Green) Certificate

#### Open

- Stage 2 (Blue) Certificate  
 220 Hours Total (Operator)  
 220 Hours Total (Network)