DATE

Application for Plate Remake/Transfer

When blank, this form is classed as OFFICIAL, when completed, this form is classed as OFFICIAL SENSITIVE

Applications for the remake of State, District, Seasonal or Passenger Transport plates complete sections 1, 2 and 4. This form can be presented in person at a Driver and Vehicle Services centre or regional agent or by mail to: Department of Transport and Major Infrastructure, Plates Section, GPO Box R1290, Perth WA 6844. When returning by mail please include payment in the form of a cheque or money order to the address above.

Note: Lost or stolen State, District, PTV and Seasonal plates cannot be remade. Some forms of redundant PTV plate types cannot be remade. Please visit Government/Commercial plates on the Department of Transport and Major Infrastructure website for more information.

Applications for the transfer of State, District, Personalised or PTV plate (immediate family only) complete sections 1, 2 and 3. This form can be presented in person at a Driver and Vehicle Services centre or regional agent.

SECTION 1 - PLATE INFORMATION	SECTION 4 - PLATE REMAKE DETAILS
PLATE NUMBER	VELUCI E TVDE
	VEHICLE TYPE
SECTION 2 - CURRENT PLATE HOLDER DETAILS	Motor vehicle
COMPANY NAME	Motorcycle
FAMILY NAME	Trailer
FIRST NAME/S	PLATE REMAKE TYPE
RESIDENTIAL ADDRESS	STATE (plates originally issued as Brand WA can only be remade in Brand WA format)
	Black characters on the yellow background
	Black characters on the white background
SUBURB	Brand WA (blue characters on the white background)
STATE W A POST CODE PHONE NUMBER	DISTRICT
	Black characters on the yellow background
EMAIL ADDRESS	Black characters on the white background
	Brand WA (blue characters on the white background)
SECTION 3 - PLATE TRANSFER	
(IMMEDIATE FAMILY ONLY) PLATE TYPE TRANSFER TO:	SEASONAL
Personal plate Spouse Child	Green characters on the yellow background
State/District plate Parent Sibling	PASSENGER TRANSPORT VEHICLE
Passenger Transport Vehicle DRIVER'S LICENCE NUMBER	On-Demand Rank or Hail (OD-RH) authorisation
STATE OF THE STATE	(Black characters on white background - TAXI prefix)
FAMILY NAME	On-Demand Charter (OD-C), Tourism Passenger Transport (TPT) and Regular Passenger Transport (RPT) authorisation (Black characters on white background - CVL prefix)
FIRST NAME/S	COLLECTION DETAILS
	(DVS centre or agent from which you wish to collect your plates)
RESIDENTIAL ADDRESS	
	I acknowledge that all previously issued plates are to be returned at time of collection.
	SIGNATURE OF DECLARANT
SUBURB	
STATE POST CODE	DATE
DECLARATION I have no further interest in the above plates and wish to transfer the plates to the nominated person for a re-issue of plate fee.	
SIGNATURE OF DECLARANT	