

JOINT OWNERSHIP (Part 3) CONTINUED

JOINT OWNER 2

FAMILY NAME

FIRST NAME

OTHER NAME/S

DATE OF BIRTH

 / /

DRIVER'S LICENCE NUMBER

SIGNATURE

JOINT OWNER 3

FAMILY NAME

FIRST NAME

OTHER NAME/S

DATE OF BIRTH

 / /

DRIVER'S LICENCE NUMBER

SIGNATURE

JOINT OWNER 4

FAMILY NAME

FIRST NAME

OTHER NAME/S

DATE OF BIRTH

 / /

DRIVER'S LICENCE NUMBER

SIGNATURE

SIGNATURE

I declare that the information on this form is true and correct. I understand that under the provisions of the *Road Traffic (Administration) Act 2008*, it is an offence to provide false or misleading information.

If applicable, I authorise the agent whose details are shown below, to submit this nomination form on my behalf.

SIGNATURE OF OWNER/LICENCE HOLDER

DATE

 / /

If this form is presented by an agent, the name and address of the agent must be provided.

AGENT

FAMILY NAME

FIRST NAME

OTHER NAME/S

PHONE NUMBER

MOBILE NUMBER

ADDRESS

SUBURB

STATE

POST CODE

SIGNATURE

OFFICE USE ONLY

IDENTIFICATION SIGHTED

<input type="checkbox"/>	Driver's licence
<input type="checkbox"/>	Date of birth
<input type="checkbox"/>	Australian Company Number (ACN)
<input type="checkbox"/>	Certificate of Registration of a Company or any other certificate of incorporation
<input type="checkbox"/>	Other evidence of legal entity status

OFFICER'S NAME

SIGNATURE

DATE

 / /

SITE

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