



Written-Off Vehicle Notification Form

Road Traffic (Vehicles) Regulations 2014

This form must be completed and sent to the jurisdiction where the vehicle is, or was, last licensed before disposing of the vehicle. If the vehicle has never been licensed, the form should be sent to the jurisdiction in which the vehicle was based at the time of the incident. You should check with the applicable licensing authority about vehicle age limits and coverage.

***Mandatory information**

DETAILS OF VEHICLE

| | | | |
|---|--------------------|---------------------|--|
| VEHICLE TYPE* (PLEASE TICK) <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Caravan <input type="checkbox"/> Trailer <input type="checkbox"/> Motorcycle | | | |
| VEHICLE MAKE* | VEHICLE MODEL* | DATE OF MANUFACTURE | |
| REGISTRATION NUMBER | STATE OR TERRITORY | | |
| VIN / CHASSIS NUMBER (17 CHARACTERS)* | ENGINE NUMBER | | |
| OWNER'S NAME AND ADDRESS | | | |

NOTIFIER DETAILS (high volume or regular notifiers should consult their registration authority about alternative arrangements for reporting of name and other notifier details)

| | | | |
|-------------------------------------|--|-------------------------|--|
| SURNAME/COMPANY NAME/BUSINESS NAME* | | DRIVERS LICENCE NUMBER* | |
| GIVEN NAMES* /ABN# /ACN#* | | PHONE* | |
| ADDRESS* | | POST CODE | |
| TYPE OF NOTIFIER (Please tick) | <input type="checkbox"/> Auction House <input type="checkbox"/> Insurer <input type="checkbox"/> Auto-dismantler <input type="checkbox"/> Dealer <input type="checkbox"/> Assessor <input type="checkbox"/> Other (specify) _____ | INSURANCE CLAIM NUMBER* | |

INCIDENT DETAILS

| | | |
|------------------|---|--------------------------|
| INCIDENT DATE | DATE WRITE-OFF DECISION MADE* | NOTIFIER'S REFERENCE NO. |
| ODOMETER READING | WRITE-OFF TYPE* <input type="checkbox"/> Re-pairable write-off <input type="checkbox"/> Statutory write-off | |

STATUTORY DECLARATION

I declare that the information given on this form is true and correct.
 *Note: Failure to supply all information may result in a \$200 infringement being issued.

| | |
|--|-------|
| SIGNATURE* | DATE* |
| IF NOTIFYING ON BEHALF OF A COMPANY OR BUSINESS, PLEASE PRINT FULL NAME HERE | |

DAMAGE CODING (refer to reverse side of form for instructions)

| | |
|--------------------------|---|
| 1st Incident type | <input type="checkbox"/> |
| Damage Location | 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 |
| Damage Severity | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| Damage Location | 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 |
| Damage Severity | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| 2nd Incident type | <input type="checkbox"/> |
| Damage Location | 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 |
| Damage Severity | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| Damage Location | 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 |
| Damage Severity | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |

DAMAGE DETAILS* (up to two incident types may be recorded)

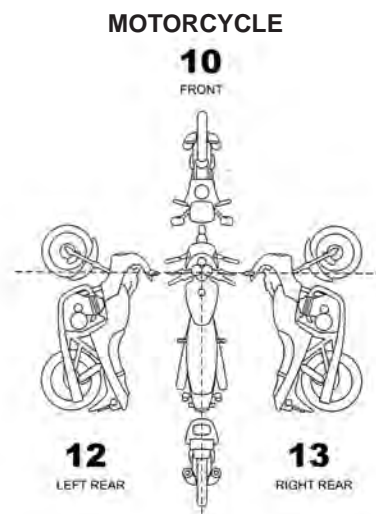
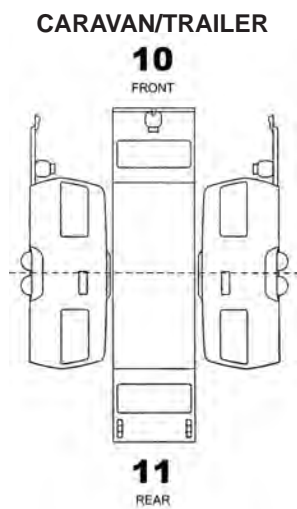
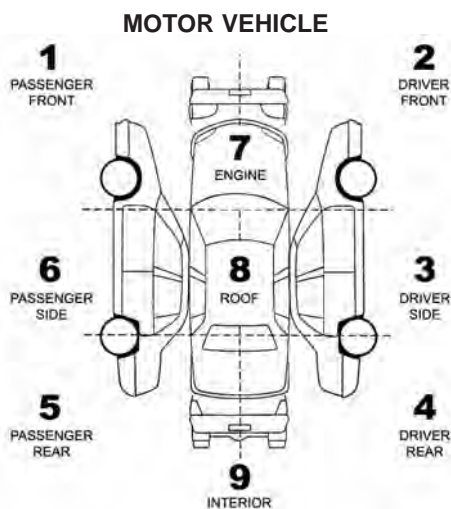
A full description of the national damage assessment criteria for passenger and light commercial vehicles and how to apply them is set out in the publication Damage Assessment Criteria for the Classification of Statutory Write-Offs (2011) published by the National Motor Vehicle Theft Reduction Council and Austroads. A PDF version of the publication can be downloaded free of charge from carsafe.com.au or austroads.com.au

1. Incident type code: Select the 'incident type' that has resulted in the damage from one of the six kinds listed below and enter the code letter next to the 1st Incident type. If a second 'incident type' is involved, enter the applicable code letter next to the 2nd Incident type.

2. Damage location: Refer to the diagrams and list below and match an appropriate **Damage severity code** to each location where the vehicle is damaged. Enter the 'damage severity codes' against the numbered 'damage locations' in the 1st Incident type table on the front page. Only use the second table if a second incident type has also caused damage.

| | | | | |
|---------------------------|---|---|--|--|
| Incident Type Code | <input type="checkbox"/> Dismantled (D) | <input type="checkbox"/> Fire (F) | <input type="checkbox"/> Hail (H) | <input type="checkbox"/> Impact (I) |
| | <input type="checkbox"/> Malicious/Vandalism/Stripping (M) | <input type="checkbox"/> Water (salt or fresh) (W) | | |

DAMAGE LOCATION



| | | | | | | | |
|----|--------------------------------------|----|-----------------------------------|----|-----------------------------------|----|-----------------------------|
| 14 | Whole vehicle | 21 | Chassis/structural rails (driver) | 28 | D pillar passenger | 35 | Suspension (driver front) |
| 15 | Floor pan (passenger front) | 22 | A pillar passenger | 29 | D pillar driver | 36 | Suspension (passenger rear) |
| 16 | Fire wall | 23 | A pillar driver | 30 | Engine block (cracked, fractured) | 37 | Suspension (driver rear) |
| 17 | Chassis/structural rails (passenger) | 24 | B pillar passenger | 31 | Transmission case | 38 | Airbag front |
| 18 | Floor pan (driver rear) | 25 | B pillar driver | 32 | Differential case | 39 | Airbag side |
| 19 | Floor pan (driver front) | 26 | C pillar passenger | 33 | Axle housing | 40 | Airbag curtain |
| 20 | Floor pan (passenger rear) | 27 | C pillar driver | 34 | Suspension (passenger front) | 41 | Seat belt pre-tensioner |

DAMAGE AND SEVERITY CODES

| | | | | | | | |
|----------|------------------------------|----------|-------------------------|----------|-----------------|----------|-----------------|
| A | Heavy panel (replace panels) | E | Unrepairable | I | Minor stripping | M | Water (fresh) |
| B | Light panel | F | Major mechanical damage | J | Major vandalism | N | Burnt/blistered |
| C | Heavy structural | G | Minor mechanical damage | K | Minor vandalism | O | Smoke and heat |
| D | Light structural | H | Major stripping | L | Water (salt) | P | Minor smoke |

LICENSING AUTHORITY

Please complete this form and return to Department of Transport - NEVDIS
Email: WOVN@transport.wa.gov.au
Fax: 1300 305 715
Mail: NEVDIS GPO Box R1290, Perth, Western Australia 6844
Web: http://www.transport.wa.gov.au
Enquiries: 1300 224 090

*Confidentiality notice

The information contained in this form is required by law to be recorded on a written-off vehicle register and may be disclosed or used for investigation, law enforcement or other purposes in accordance with the legislation of the State or Territory concerned. It will not be disclosed to any third parties without consent unless authorised by law. Check with your licensing authority for details of any local variation from these general provisions.