

## **WHEELCHAIR-ACCESSIBLE TAXI LICENCE APPLICATION TO TRANSFER LICENCE TO SUBSTITUTE WHEELCHAIR ACCESSIBLE TAXI**

Please fill in the relevant sections of this form. Your completed form should be mailed to the Passenger Transport Services Branch, Department of State Growth, GPO Box 536, Hobart, 7001, or faxed to 6233 5377, or emailed to [operator.accreditation@stategrowth.tas.gov.au](mailto:operator.accreditation@stategrowth.tas.gov.au)

You will be advised in writing whether your application is successful.

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### **IMPORTANT INFORMATION**

The transfer of the licence will not be approved unless the Transport Commission is satisfied that:

- the proposed replacement vehicle is a substitute wheelchair-accessible taxi and is under current [inspection](#);
- the vehicle to which the licence relates is not being used for any other purpose and is not able to be operated as a wheelchair-accessible taxi for the period of time specified in the application and
- the holder of the licence is taking action to repair or permanently replace the vehicle to which the licence relates;

If this application is approved the holder of the licence must:

- affix the licence number plate of the unavailable wheelchair accessible taxi to the substitute wheelchair-accessible taxi;
- keep that licence number plate affixed to that vehicle during the time period that the substitute wheelchair-accessible taxi is authorised to operate under that licence; and
- remove that licence number plate from the substitute wheelchair-accessible taxi on the expiry of that time period.

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### **SECTION 1 – LICENCE DETAILS**

Licence No: \_\_\_\_\_ Taxi Area: \_\_\_\_\_

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## SECTION 2 – LICENCE HOLDER DETAILS

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

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## SECTION 3 – VEHICLE DETAILS

The proposed vehicle must be a currently registered wheelchair accessible taxi, with Class 6 MAIB premium.

***Verification that the proposed substitute taxi is under current inspection and appropriately registered will be obtained prior to approval of this application.***

Vehicle make/model: \_\_\_\_\_

Month/Year: \_\_\_\_\_

Registration: \_\_\_\_\_

Name of Registered  
Operator of vehicle: \_\_\_\_\_

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## SECTION 4 – TRANSFER DETAILS

Date transfer to commence: \_\_\_\_\_

Date of end of transfer: \_\_\_\_\_

Please outline the reason the original wheelchair-accessible taxi is unable to be used under the authority of this licence for the time period specified above, and outline the action you are taking to repair or permanently replace the vehicle. Please attach copies of any supporting documentation (e.g. accident report, quote from repairer, order docket etc). If additional space is required, please attach another sheet.

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## SECTION 5 – SIGNATURE

I confirm that the vehicle to which this wheelchair-accessible taxi licence relates is not able to be used as a wheelchair-accessible taxi for the period of time specified in this application.

Licence holder: \_\_\_\_\_

Date: \_\_\_\_\_

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## APPROVAL/REFUSAL OF TRANSFER

The Transport Commission herewith approves/refuses this application for transfer.

Expiry date of transfer: \_\_\_\_\_

Reasons for refusal of application if appropriate: \_\_\_\_\_

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## SIGNED FOR THE TRANSPORT COMMISSION

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Name: \_\_\_\_\_

Date: \_\_\_\_\_

## PERSONAL INFORMATION PROTECTION STATEMENT

Personal information we collect from you for Registration and Licensing processes will be used by the Registrar of Motor Vehicles and the Transport Commission for that purpose and may be used for other purposes permitted by the [Vehicle and Traffic Act 1999](#), the [Passenger Transport Services Act 2011](#) and the [Taxi and Hire Vehicle Industries Act 2008](#) and associated laws. Your personal information may be disclosed to contractors and agents of the Registrar of Motor Vehicles and the Transport Commission, law enforcement agencies, the Motor Accident Insurance Board, vehicle manufacturers (safety recalls only), courts and other public sector bodies or organisations authorised to collect it. This information will be managed in accordance with the [Personal Information Protection Act 2004](#) and may be accessed by you on request to this Department. You may be charged a fee for this service. Failure to provide this information may result in your application not being processed or records not being properly maintained.