Motor vehicle dealer prescribed annual return for an individual

Use this form to lodge your motor vehicle dealer annual return as an individual in accordance with Section 141 of the Consumer Affairs and Fair Trading Act 1990.

If any of your business details have changed (additional car yard, new dealer manager, other contact details) please submit an application for a variation of a motor vehicle dealer licence with this application and the relevant fee.

See the <u>motor vehicle dealer licences</u> webpage for further information and the annual prescribed fee. Please note: there is an additional fee for each additional car yard.

Licence details								
Licensee name:								
Licence number:								
Applicant details								
Surname:						Date of bir	th:	
Given name/s:								
Postal address:								
Suburb:					State:		Postcode:	
Contact details								
Phone number:				Mob	ile numbe	r:		
Email address:								
Do you agree to red	ceive cor	rrespondenc	e by email?	1				Yes / No
Principle place of b	usiness ((primary car y	/ard)					
Dealer manager nar	me:							
Business address:								
Suburb:					State:		Postcode:	
Phone number:				Mobi	le number	:		
Email address:								
Do you use a business or trading name?				Yes / No				
If yes, provide your business name, business number and website below.								
Business name:								
Business number:								
Website address:								
Do you intend to carry on business from more than one car yard? Yes / No								
If yes, complete below. If more than one other place of business copy and attach to the application.								



Other place of busi	ness details (Additional car yard deta	ails)		
Dealer manager na	me:			
Business address:				
Suburb:		State:	Postcode:	
Phone number:		Mobile number:		
Email address:				
Disclosures				
In the NT or elsewh	nere during the last 12 months, hav	e you:		
1. Applied for an authorisation (however described), such as a licence or certificate, or registration, under any Act relating to the regulation of any business trade, profession, industry or occupation? Yes / No				Yes / No
If yes, provide deta	ils below:			
2. Were any of the	e applications for such authorisatio	n refused or witho	drawn?	Yes / No
If yes, provide deta	ils below:			
3. In respect of those applications approved, is there any authorisation no longer in force for any reason?				Yes / No
If yes, provide deta	ils below:			
4. In the last 10 years, been subject to action of a disciplinary nature relating to any authorisation referred to above?				Yes / No
If yes, provide deta	ils below:			
5. Is there any investigation or are there any proceedings, pending or current, which may result in such action of a disciplinary nature in relation to any authorisation referred to above?				Yes / No
If yes, provide details below:				
6. Since being licensed, have you been convicted of, or served any part of a term of imprisonment, wherever committed, for an offence involving fraud, dishonesty or physical violence or an offence against the Consumer Affairs and Fair Trading Act 1990?				Yes / No
If yes, provide deta	ils below:			



7. Is there a charge pending in relation to an offence involving fraud or dishonesty?	Yes / No			
If yes, provide details below:				
8. Have you been known by any other names?	Yes / No			
If yes, provide details below:				
9. Assigned your estate for the benefit of creditors or been declared bankrupt?	Yes / No			
If yes, provide details below:				
10. Been a secretary, a director, or a person concerned in the management of a corporation which has been placed under a receiver or manager, or wound up, or which has entered	Yes / No			
into a compromise or scheme of arrangements with creditors?	. 55 , 5			
If yes, provide details below:				
Applicant declaration				
I, (full name):				
Of (address):				
Solemnly and sincerely declare that:				
All statements and information contained in this application are true and correct to the best of my knowledge by virtue of the Oaths, Affidavits and Declarations Act 2010; and				
 knowledge by virtue of the Oaths, Affidavits and Declarations Act 2010; and I have read and understood the information contained in this application; and 				
The declaration is true and correct; and				
I know that it is an offence to make a declaration that is false in any material particular.				
This declaration is made at: (location) on: (date)				
Applicant signature:				
Note: Under the Oaths, Affidavits and Declarations Act 2010 a person wilfully making a false sta	tement or			
altering a statement, in a statutory declaration is guilty of a crime and is liable to a penalty or im or both.	nprisonment,			
Supporting documents checklist				
Prescribed application fee – See the motor vehicle dealer licences page for current fee.	Yes / No			
Current licence or permit issued by the Commonwealth, State or Territory government that	1037110			
has your DOB and photo attached.				
For example: Drivers licence, passport, evidence of age card, firearms licence, working with				
children's card etc.				
Signed and completed declaration.	Yes / No			



Privacy statement

The Northern Territory Government complies with the Information Privacy Principals scheduled by the *Information Act* 2002.

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Complete applications can be lodged in person, email or via post at a Territory Business Centre below:

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Darwin:	Darwin Corporate Park, Ground Floor, Building 3, 631 Stuart Highway Berrimah		
Katherine:	Big Rivers Government Centre, 5 First Street, Katherine		
Tennant Creek:	Shop 2, Barkly House, Cnr Davidson and Paterson Streets, Tennant Creek		
Alice Springs:	Ground Floor, The Green Well Building, 50 Bath Street Alice Springs		
1800 193 111	territorybusinesscentre@nt.gov.au	GPO Box 9800 Darwin NT 0801	

Payment details

A fee is payable on lodgement of this application form. Payment can be made by:

- Cash (in person only); or
- Cheque (made out to Receiver of Territory Monies); or
- Credit card (Visa or MasterCard accepted in person or over the phone). Note: A staff member from the Territory Business Centre will contact you via phone for payment.

Payment date: Receipt number: Amount paid:

