

# Application for Appointment as an Authorised Inspector

Department of Infrastructure, Planning and Logistics  
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Phone: 08 8999 3127  
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VS4

<b>Official Use Only</b>	Customer ID:	Date received: .....
		Receipt No.

## Notes for completing this form

1. Applications must be supported by qualifications acceptable to the Department
2. The Department may reject any application or request further information
3. All applicants will be required to undertake a written examination
4. Applicants must hold a valid drivers licence for the class of vehicles relevant to the required authorisation
5. All applicants will be required to submit a current criminal history check
6. Applicants will be required to submit two written work related references

## Application Type ( ✓ tick as appropriate)

- New Application   
  Renewal   
  Premises Change   
  Category Change   
  Change Business Type

## Section 1 - Applicant Details

Full Name			
Driver Licence Number		State/Class/Expiry	
Residential Address			
Postal Address			
Email Address			
Phone Number		Date of Birth	...../...../.....

## Section 2 - Employer Details ( Note: Business address not required if only a Mobile Authorised Inspector)

Business Trading Name			
Business Address			
Postal Address			
Contact Person			
Phone Number		Position Title	
Email Address			

## Business Type ( ✓ tick as appropriate)

- Service Station   
  Repair Workshop   
  Dealership   
  Mobile Authorised Inspector   
  Other

**Section 3 – Privacy statement**

The Registrar of Motor Vehicles is required to collect information for registrations, licenses and permits under section 92 of the NT *Motor Vehicles Act 1949*. The Registrar adheres to the Northern Territory Government Privacy Statement and the *Information Act 2002*. Further information on privacy can be found at <https://nt.gov.au/page/copyright-disclaimer-and-privacy>

**Section 4 – Inspection category required ( ✓tick as appropriate)**

- |  |   |
|--|---|
| <input type="checkbox"/> <b>A</b> Vehicles up to and including 4.5 tonne GVM | <input type="checkbox"/> <b>E</b> Commercial passenger vehicles                           |
| <input type="checkbox"/> <b>B</b> Motorcycles                                | <input type="checkbox"/> <b>F</b> Light trailers up to and including 4.5 tonne ATM        |
| <input type="checkbox"/> <b>C</b> Heavy vehicles                             | <input type="checkbox"/> <b>G</b> All trailers  |
| <input type="checkbox"/> <b>D</b> Plant and equipment                        | <input type="checkbox"/> <b>H</b> Compliance checks – new vehicles, motorcycles, trailers |
|  | <input type="checkbox"/> <b>V</b> Vintage veteran   |

**Section 5 – Details of Applicant’s Qualifications and Employment**

**Details of Qualifications (New Applicants)**

*(type, certificate number, date of issue, authorising institution, state/country obtained)*


**Employment History (New Applicants)**

*(employer, commencement date, termination date, duties undertaken)*


**Section 6 – Sample of workshop stamp and signature**

**Section 7 – Applicant Declaration**

I, .....  
(full name)  
solemnly and sincerely declare, by virtue of section 18 the  
*Oaths, Affidavits and Declarations Act 2010*, that the information provided in this application is true and correct in every particular.

...../...../.....  
Location where declaration is made: Signature: Date:

**Section 8 – Employer/Proprietor Declaration (*fixed premises*)**

I, .....  
(full name)  
solemnly and sincerely declare, by virtue of section 18 the  
*Oaths, Affidavits and Declarations Act 2010*, that the information provided in this application is true and correct in every particular.

...../...../.....  
Location where declaration is made: Signature: Date:

**Section 9 – Release of Information (*employer/proprietor of applicant*)**

I, ..... of .....  
(full name) (premises name)

hereby approve for the Northern Territory Government to release and publish the following details:

- Business Name
- Business Address (*if applicable*)
- Business Phone Number
- Categories Approved to Inspect  (*tick where appropriate*)
- Child Seat Assistance  (*tick where appropriate*)

...../...../.....  
Signature: Date:

**OFFICE USE ONLY**

**Section 10 – Appointment as an Authorised Inspector**

<input type="checkbox"/> Applicant interviewed	<input type="checkbox"/> References attached	<input type="checkbox"/> Assessment tests	<input type="checkbox"/> Driver licence checked
<input type="checkbox"/> Qualifications attached	<input type="checkbox"/> Criminal history attached	<input type="checkbox"/> Premises inspected	<input type="checkbox"/> Other
<b>Written Results</b> <input type="checkbox"/> Pass <input type="checkbox"/> Fail	<b>Verbal Results</b> <input type="checkbox"/> Pass <input type="checkbox"/> Fail	<b>Submitted Qualifications</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Comments on examination:

**Section 11 – Categories Approved to Inspect**

- |  |   |
|--|---|
| <input type="checkbox"/> <b>A</b> Vehicles up to and including 4.5 tonne GVM | <input type="checkbox"/> <b>E</b> Commercial passenger vehicles                           |
| <input type="checkbox"/> <b>B</b> Motorcycles                                | <input type="checkbox"/> <b>F</b> Light trailers up to and including 4.5 tonne ATM        |
| <input type="checkbox"/> <b>C</b> Heavy vehicles                             | <input type="checkbox"/> <b>G</b> All trailers  |
| <input type="checkbox"/> <b>D</b> Plant and equipment                        | <input type="checkbox"/> <b>H</b> Compliance checks – new vehicles, motorcycles, trailers |
|  | <input type="checkbox"/> <b>V</b> Vintage veteran   |

**Section 12 – Service Level Agreement**

Applicant has provided a signed and witnessed Service Level Agreement, in accordance with the *Northern Territory Authorised Inspectors Business Rules*  Yes  No

**Section 13 - Approval**

<b>Assessing Officer:</b>		<b>Delegate:</b>		<b>Authorised Inspector Number</b>
<input type="checkbox"/> Recommended	<input type="checkbox"/> Approved	<input type="checkbox"/> Not Recommended	<input type="checkbox"/> Not Approved	
.....	.....	.....	.....	
Signature:	Signature:	Signature:	Signature:	
...../...../.....	...../...../.....	...../...../.....	...../...../.....	
Date:	Date:	Date:	Date:	