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Fax: Email: Email: cpv.compliance@nt.gov.au
Website: www.nt.gov.au/cpv

Office Use Only			
Region			
Date Received	Referral		
/ /			

## **Complaint Report - Commercial Passenger Vehicles (CPV)**

Person Submitting Report			
Name	Telephone Number Fax Number		
Postal Address	Mobile Telephone Number		
	Email Address		
State Postcode			
	Date		
Signature			
<b>Complaint Details</b>			
Vehicle Registration Number Vehicle Type	Name of Company		
Day Date	Time		
/ /	: AM/PM		
Location	Driver's Name and/or ID Number (if known)		
Reporting Action			
Has this matter been reported?			
Police Yes No Date / /	Company/Operator		
Promis Number	Person's Name		
Officer Name	Position Title		
Location			
Action Taken	Action Taken		

Description of Complaint		
Witness Details (if any)		
Name of Witness	Telephone Number Fax Number	
Postal Address of Witness	Mobile Telephone Number	
	Email Address	
State Postcode		
Signature of Witness	Date	

## **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*. The Registrar adheres to the Department's Privacy Statement and the *Information Act*. Further information on privacy can be found at <a href="https://www.transport.gov.au">www.transport.gov.au</a>.