Application for a motor vehicle dealer licence – Individual

Use this form to apply for a motor vehicle dealer individual licence in accordance with Section 132 of the Consumer Affairs and Fair Trading Act 1990. Applicants must have attained the age of 18 years.

See the motor vehicle dealer licences webpage for further information and the prescribed fee.

| Licence details | | | | | | | | |
|--|------------|--------------------------|----------|------------|----------|----------|-----------|---|
| Surname: | | | | | | Date | of birth: | |
| Given name/s: | | | | | | | | |
| Other name/s (if applicable): | | | | | | | | |
| ABN: | | | | | | | | |
| Business address: | | | | | | | | _ |
| Suburb: | | | | State: | | | Postcode: | |
| Is your postal addre | ss the sam | ne as above? If no, comp | lete be | low. | | | | |
| Postal address: | | | | | | | | |
| Suburb: | | | | State: | | | Postcode: | |
| Contact details | | | | | | | | |
| Phone number: | | | Mobi | le numbe | r: | | | |
| Email address: | | | | | | | | |
| Do you agree to receive correspondence by email? Yes / No | | | | | | Yes / No | | |
| Approved manager details | | | | | | | | |
| Note: an application | n form for | an approved manager w | ill need | d to be lo | dged w | vith th | nis form. | |
| Will you be acting as the approved manager? Yes / No | | | | | | | | |
| If no, provide approved manager name below: | | | | | | | | |
| Approved manager | name: | | | | | | | |
| Phone number: | | | Mobi | le numbe | r: | | | |
| Email address: | | | | | | | | |
| Principal place of business (primary car yard) | | | | | | | | |
| Business address: | | | | | | | | |
| Suburb: | | | | State: | | | Postcode: | |
| Do you intend to use a business or trading name? | | | | | | Yes / No | | |
| If yes, provide the business name, registration number and website below: | | | | | | | | |
| Business name: | | | | | | | | |
| Business number: | | | Webs | site addre | ess: | | | |
| Do you intend to carry on business from more than one car yard? Yes / N | | | | | Yes / No | | | |
| If yes, complete below. If more than two other place of business copy and attach to the application. | | | | | | | | |



| Other place of busir | ness detail | s 1 (additional car | yard details) | | | | |
|---|-------------|----------------------------|---------------|-----------------|----------------|---------------|---------------|
| Business manager n | name: | | | Licence number: | | | |
| Business address: | | | | | | · | |
| Suburb: | | | | State: | | Postcode: | |
| Phone number: | | | Mok | ile numb | er: | | |
| Email address: | | | | | | | |
| Other place of business details 2 (additional car yard details) | | | | | | | |
| Business manager n | ame: | | | | Licence num | nber: | |
| Business address: | | | | | | | |
| Suburb: | | | | State: | | Postcode: | |
| Phone number: | | | Mok | ile numb | er: | | |
| Email address: | | | | | | | |
| Referee statement | | | | | | | |
| Two referee statemers manager. Referees r | | | | | - | a motor vehic | le dealer or |
| Referee 1 | | | | | | | |
| Referee name: | | | | | | | |
| of: (address) | | | | | | | _ |
| Suburb: | | | | State: | | Postcode: | |
| Position title: | | | | | | | |
| declare that I have k | nown (app | olicants name): | | | | | |
| For (number of years) | : | year(s) and that | in my opinio | n he/she | is a person of | good fame ar | nd character. |
| Referee signature: | | | | | Date: | | |
| Referee 2 | | | | | | | |
| Referee name: | | | | | | | |
| of: (address) | | | | | | | |
| Suburb: | | | | State: | | Postcode: | |
| Position title: | | | | | | | |
| declare that I have known (applicants name): | | | | | | | |
| For (number of years) | : | year(s) and that | in my opinio | n he/she | is a person of | good fame ar | nd character. |
| Referee signature: | | | | | Date: | | |

Proof of identity (ID)

The applicant <u>must attach</u> either one of the following combinations:

- One primary and two secondary documents; or
- Two primary and one secondary documents from the list below.

ID must include at least one type of primary ID that contains the applicants name and date of birth. If you are unable to provide the required documents please contact Occupational Licensing on 1800 193 111.

| Primary document | Select |
|---|----------|
| Australian passport (note: passports are still valid for 2 years after expiry, unless cancelled) | Yes / No |
| Australian drivers licence | Yes / No |
| Licence or permit issued by the Commonwealth, State or Territory government that has your DOB and photo i.e HRWL licence, working with children's card etc | Yes / No |
| Proof of Age Card issued by an Australian State or Territory | Yes / No |
| Identity document issued by an Aboriginal Land Council that has your photograph | Yes / No |
| Secondary document | Select |
| Australian birth certificate/card | Yes / No |
| Australian citizenship certificate | Yes / No |
| Photo ID card showing you are a Commonwealth, State or Territory Government employee | Yes / No |
| Medicare, centrelink or health care card | Yes / No |
| Council rates notice with your name and current residential address | Yes / No |
| Utilities notice with your name and current residential address | Yes / No |
| Foreign drivers licence | Yes / No |
| Disclosures | |
| During the last 12 months, have you or a person concerned in the management of this business | ss: |
| Have you 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 |
| If yes, provide details below: | |
| | |
| | |
| Were any of the applications for such authorisation refused or withdrawn? | Yes / No |
| Were any of the applications for such authorisation refused or withdrawn? If yes, provide details below: | Yes / No |
| , , , , | Yes / No |
| , , , , | Yes / No |

| In the last 10 years, have you been subject to action of a disciplinary nature relating to any authorization referred to above? | Yes / No | | | | | |
|--|----------|--|--|--|--|--|
| If yes, provide details below: | | | | | | |
| | | | | | | |
| Are there any investigations or proceedings, pending or current, which may result in such action being taken in relation to any authorization referred to above? | | | | | | |
| If yes, provide details below: | | | | | | |
| | | | | | | |
| 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 details below: | | | | | | |
| | | | | | | |
| Had a charge pending in relation to an offence involving fraud or dishonesty? | Yes / No | | | | | |
| If yes, provide details below: | | | | | | |
| | | | | | | |
| Have you been known by any other names? Yes / No | | | | | | |
| If yes, provide details below: | | | | | | |
| | | | | | | |
| Applicant declaration | | | | | | |
| - 11 | | | | | | |
| I, (full name): | | | | | | |
| I, (full name): Of (address): | | | | | | |
| | · | | | | | |
| Of (address): Solemnly and sincerely declare that: • All statements and information contained in this application are true and correct to the 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 | · | | | | | |
| Of (address): Solemnly and sincerely declare that: • All statements and information contained in this application are true and correct to the 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. | · | | | | | |

| Supporting documents checklist | | | | |
|---|----------|--|--|--|
| Prescribed application fee – See the motor vehicle dealer licences page for current fee. | Yes / No | | | |
| Business plan attached. | Yes / No | | | |
| Completed application for approval as a manager with relevant prescribed fee attached. | Yes / No | | | |
| Criminal history name check results attached for each person associated with the application including the proposed manager. | Yes / No | | | |
| Note: Results can take up to 6 weeks to be processed. | | | | |
| Two referee statements stating that the director(s) are fit and proper persons to be a motor vehicle dealer or manager completed. | Yes / No | | | |
| Proof of ownership, copy of lease of premises or letter of consent/approval of owner to run a motor vehicle dealership at the nominated address attached. | Yes / No | | | |
| Proof that these premises are appropriately zoned to carry on the business of a motor vehicle dealer attached. | Yes / No | | | |
| Proof of identity (ID) documents attached for each person associated with the application. | Yes / No | | | |
| Signed and completed applicant declaration. | Yes / No | | | |

Privacy statement

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

Disclaimer

The Northern Territory Government respects and is committed to safeguarding the confidentiality and privacy of the information that it collects and handles, in accordance with the *Northern Territory Information Act* 2002.

You have been asked to provide personal information necessary for us to meet your application requirements. You do not have to provide your personal information but if you choose not to, this application will be incomplete and we will be unable to process it.

The information you provide will be accessible to Racing and Gaming and will only be used to provide a department service or program. We will not disclose your personal information to third parties unless, authorised or required by law to do so you have given us consent to share your personal information for a specific purpose.

You may request access to the personal information we hold about you. If you want more information about the Northern Territory's privacy laws, please refer to the *Northern Territory Information Act 2002*, or the Office of the Information Commissioner NT.

| Lodgement | | | | | |
|--|--|---|-----------------------------|--|--|
| Complete applications can be lodged in person, email or via post at a Territory Business Centre below: | | | | | |
| Darwin: | Darwin Corporate Park, Ground Floor, Building 3, 631 Stuart Highway Berrimah | | | | |
| Katherine: | Big F | 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: | |
|---------------|----------------|--------------|--|