

Out of State driver licence renewal or replacement application

Road User Services Division

Use this form when out of the state to renew your driver licence or apply for a replacement. You will only be able to renew your driver licence once by the out of state process.

Requirements: You will need to supply a current colour passport photo (45x35mm in size) showing a full front view of your head on a white background. No head wear is acceptable, unless worn for religious purposes (veils are not acceptable). Sun or dark glasses are not to be worn. This photo will be used as verification against the one held on record and may not appear on your new driver licence card.

A copy of your current driver licence or passport **MUST** accompany this application.

1. Your details

Replace: <input type="checkbox"/>	Renewal: <input type="checkbox"/>	(If renewing complete section two of this application.)	Licence No: <input type="text"/>
Family name: <input type="text"/>	Given name(s): <input type="text"/>		
Tasmanian residential address: <input type="text"/>			
Mailing address: <input type="text"/>			
Contact number: <input type="text"/>	Date of birth: <input type="text"/>		
dd/mm/yyyy			
Email address: <input type="text"/>			

2. If renewing your licence

I wish to renew my licence for: (please tick appropriate box, based on your current location or if you are a defence force personnel you can for renew up to five years)

Interstate

One year only

Overseas

One year

Two years

Defence Force

Indicate the number of years one - five

Medical information (you may need to provide a medical report if you answer 'yes' to any medical questions)

Do you have:

- heart disease?
- sleep apnoea?
- frequent fainting?
- giddy attacks?
- epilepsy?
- diabetes?

No	Yes
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Do you have any other medical condition or physical or mental disability which may affect your driving?

Do you need to use prescription glasses or contact lenses when driving?

Have you had a fit or convulsion in the last five years?

If you answered 'yes' to any of the questions in this section, has the medical condition been reported in any previous licence application?

No	Yes
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

How is your diabetes controlled?

Insulin Medication Diet

Applicants declaration

I declare that I have truthfully answered these medical questions to the best of my knowledge and belief.

Signature



Tasmanian
Government

4. Your signature and photo

Attach photo here

WARNING - Penalty for dishonestly providing false or misleading information is \$4,000 and/or imprisonment for up to 6 months for a first offence.

5. Payment details

You can pay for the renewal or replacement by either sending a cheque or Money Order in Australian dollars or by providing your Credit Card Details.

For renewal and replacement fees see www.transport.tas.gov.au/fees_forms/registration_licensing

If overseas you **MUST** pay an additional postage and handling fee. Please tick the method of postage required.

Standard air mail \$8.00 : Express post \$20.00 :

Total amount payable (including postage and handling if overseas) \$.....

To pay by credit card, please fill out the fields below.



Name on card:

Card number:

Expiry date: / CVV:
mm/yyyy CVV is the last 3 digits on the back of your card

Signature

5. How to lodge your completed application



Email: tes@stategrowth.tas.gov.au please ensure that when scanning the photo it is saved as a jpg file and attached to the email along with your application and any attachments or



Post to Department of State Growth, GPO Box 1002 Hobart Tasmania 7001

Personal information protection statement

Personal Information Protection Statement Personal information we collect from you for Registration and Licensing processes will be used by the Registrar of Motor Vehicles for that purpose and may be used for other purposes permitted by the Vehicle and Traffic Act 1999 and associated laws. Your personal information may be disclosed to contractors and agents of the Registrar of Motor Vehicles, 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

For more information phone

1300 135 513 or if calling from overseas
+61 3 616 99017