**APPLICATION TO CANCEL / WITHDRAW A REGULAR**

**PASSENGER SERVICE (RPS)**

PTS511\_1

**PRIVACY STATEMENT**

1. Personal information will be collected from you for the purpose of assessing eligibility for the provision/extension of a regular passenger transport service, and will be used by the Department of State Growth for assessing, advising upon, determining and managing the application and may be used for other purposes permitted by the *Passenger Transport Act 2011* and *Passenger Transport Regulations 2013*.
2. Failure to provide this information may result in your application not being able to be processed.
3. Your personal information will be used for the primary purpose for which it is collected, and may be disclosed to contractors and agents of the Department of State Growth, law enforcement agencies, courts and other organisations authorised to collect it.
4. Personal information will be managed in accordance with the *Personal Information Protection Act 2004* and may be accessed by the individual to whom it relates on request to the Department of State Growth. You may be charged a fee for this service.
5. **Current Operator Details**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Accreditation Number | | | | | | | | | | | | | |  | | | | Contract/Route Number to be cancelled | | | | | | | | | | | | | | |  | | | | | | |
|  | |  | |  | |  | |  | |  | |  | |  | | | |  | |  | |  | |  | |  | |  | |  | | |  | | | | | | |
| Family Name | | | | | | | | | | | | | | | | | | Given Name/s | | | | | | | | | | | | | | | | Title | | | | | |
|  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | |
| Business/Residential Address | | | | | | | | | | | | | | | | | | Suburb/Town | | | | | | | | | | | | | | | | Postcode | | | | | |
|  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | |  | |  |  |
| Postal Address (if same as Business/Residential write ‘As Above’) | | | | | | | | | | | | | | | | | | Suburb/Town | | | | | | | | | | | | | | | | Postcode | | | | | |
|  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | |  | |  |  |
| Telephone Number | | | | | | | | | | | | | | | | | | Fax Number | | | | | | | | | | | | | | | | | | | | | |
|  |  | |  | |  | |  | |  | |  | |  | |  |  |  |  |  | |  | |  | |  | |  | |  | |  |  | | |  | |  | | |

**2. Proposed Date of Cancellation**

|  |  |
| --- | --- |
| Proposed Date of Cancellation: | / / 20\_\_\_ |

**3. Declaration**

I (name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_wish to cancel/withdraw the above mentioned RPT service

(contract/route number)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ commencing from the close of business on \_\_\_/\_\_\_/ 20\_\_\_.

|  |  |  |
| --- | --- | --- |
| Signed | | Date |
|  |  |  |

**Please return form to:**

Passenger Transport Services Branch

Department of State Growth

GPO Box 1242 Hobart 7001

Ph: 03 6166 3335

Fax: 03 6233 5377