Application for a Temporary Taxi Licence

Form ID: PT826-2 (09/22)

Before completing this form, you should review our information for industry and operators. Licence Details Taxi area Which taxi service will be provided? Standard (not wheelchair accessible) Wheelchair accessible Temporary period to start Temporary period to end Applicant Details Name Accreditation number Residential address Postcode Suburb or town Postal address Postcode Suburb or town Email address Phone number



Vehicle Details	
Name of registered operator of vehicle	
Note: Must be in the same name as the applicant.	
Registration number	Make and model
Month and year	
The Transport Commission may require additional information to support the application.	
Personal Information Protection Statement	
You are providing information to the Transport Commission, which will manage that information in accordance with the <u>Personal Information Protection Act 2004.</u>	
The personal information collected here will be used by other authorities including the Department of State Groof administering the <u>Taxi and Hire Vehicle Industries Act Traffic Act 1999</u> and associated laws.	rowth and Registrar of Motor Vehicles, for the purpose
Failure to provide this information may affect the asses properly maintained. The Transport Commission may disclose it to third parties in circumstances allowed for	also use the information for related purposes, or
You have the right to ask the Department of State Gro have provided. You may be charged a fee for this service	owth to give you access to the personal information you ce.
Name	
Signature	Date
If the applicant is not an individual, include position and authority to sign of behalf of the applicant:	
Submit Application	
Submit your completed application form and pay any applicable fees in person, at any Service Tasmania Shop.	

ENQUIRIES

 ${\bf Email} \quad {\bf operator.accreditation@stategrowth.tas.gov. au}$

Phone 1300 135 513