

Department of State Growth

Road User Services Division

Form Number: MR89 08/24



APPLICATION FOR RELEASE OF INFORMATION

Full Name of Applicant/ Company Name	Family Name/ Company	
	Other Names	
Postal Address		
Email Address		
Date of Birth	Mobile Number	Driver Licence Number

Please complete the relevant section below.
The application must be signed. Evidence of Identity must be provided.

1. Motor Vehicle Accident Copy of Police report or letter from Insurance Company **must** be attached.

1. Date of Accident / /	4. Specific location of accident.
2. Your own Registration Number	<input type="text"/>	
3. Registration Number of other vehicle(s)	<input type="text"/>	

2. Your Certified Driver Licence History

<input type="checkbox"/> Date and year of obtaining driver licence	<input type="checkbox"/> 10 Year Driving History
<input type="checkbox"/> 3 Year Driving History	<input type="checkbox"/> All Years Driving History
<input type="checkbox"/> 5 Year Driving History	

3. Your Vehicle / Registration Enquiry

Registration Number	<input type="text"/>	<input type="checkbox"/> Other – please specify
	
<input type="checkbox"/> Statement for date of disposal	

4. Details of Other Person's Record Driver Licence Enquiry Vehicle Registration Enquiry

Authority letter and evidence of identity from the licence/registration holder must be provided

Drivers Licence Number	<input type="text"/>	Registration Number	<input type="text"/>
Type of Information required and reason.....			
.....			

5. Other Request for Information (Including your personal information)

Type of Information required and reason
.....

Name and Signature of Applicant		
..... / /
Name	Signature	Date

Office Use Only
Evidence of identity
<input type="checkbox"/> Sighted
<input type="checkbox"/> Authority letter (attached)
Name.....
Date.....
Signature
Information provided to client
Yes <input type="checkbox"/> No <input type="checkbox"/>

http://www.transport.tas.gov.au/fees_forms/registration_licensing

Card Details not required on form when attending Service Tasmania

Name on Card	Expiry Date
Card Number		

PERSONAL INFORMATION PROTECTION STATEMENT: You are providing personal information to the Registrar of Motor Vehicles, who will manage that information in accordance with the *Personal Information Protection Act 2004* and relevant provisions of the *Vehicle and Traffic Act 1999*. The personal information collected here will be used by the Registrar of Motor Vehicles for driver licensing and vehicle registration purposes, and related purposes under the *Vehicle and Traffic Act 1999* and associated laws, including for national identity matching and verification purposes. Failure to provide this information may result in your application not being processed, or records not being properly maintained. The Registrar of Motor Vehicles may also use the information for related purposes or disclose it to third parties in circumstances allowed for by law. You have the right to access your personal information by request to the Registrar of Motor Vehicles and you may be charged a fee for this service.