

## APPLICATION FOR A VARIATION TO THE CONDITIONS OF AUTHORISATION FOR A REGULAR PASSENGER SERVICE (RPS)

PTS500\_1

### PRIVACY STATEMENT

1. Personal information will be collected from you for the purpose of assessing eligibility for a variation to the conditions of authorisation for your regular passenger 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 Services Act 2011* and *Passenger Transport Services 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.

### 1. APPLICANT NAME AND ADDRESS DETAILS

|                          |                      |                      |
|--------------------------|----------------------|----------------------|
| Title                    | Family Name          | Given Name(s)        |
| <input type="text"/>     | <input type="text"/> | <input type="text"/> |
| Postal Address           | Suburb/Town/Locality | Postcode             |
| <input type="text"/>     | <input type="text"/> | <input type="text"/> |
| Daytime Telephone Number | Fax Number           |                      |
| <input type="text"/>     | <input type="text"/> |                      |

### 2. WHY DO YOU REQUIRE A CHANGE?

If insufficient space, please attach a separate sheet.

### 3. SUMMARY OF PROPOSAL

Please supply a description of the proposed route or changes including:

- The location of the stops; and
- The approximate departure/arrival times for the origin and destination

**What is the contract/route number and operator's name, if known?**

Contract/Route Number

Operator's Name



**All drivers of a vehicle operating as an authorised regular passenger service will need to hold an ancillary certificate, in addition to a drivers licence of the appropriate class. If you would like further information on how to obtain an ancillary certificate, please contact the Registration and Licensing Branch on 1300 851 225.**

Desired Commencement Date

Full Name of Person nominated in Section 1

I declare the information provided to be true and correct.

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