Department of State Growth

Road User Services Division

Form Number: MR30 11/22

**OFFICE USE ONLY**

New Registration Number ………………………

Issued on (date)……………………………….. ……..

At …………………………………………………………......

By ……………………………………………….…………….

* Proof of identity sighted
* Proof of address sighted
* Proof of garage address sighted

**Application for** (Please C:\Users\ka-cornish\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\L7NN5DY4\MC900434665[1].wmf box/s below)



**Replacement Certificate of Registration and**

**Certificate of Premium Paid**

and/or

**Replacement Number Plates**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Registration Number | | Make (Holden, Toyota, etc.) | Vehicle Type (Car, Truck, Trailer, etc.) | |
| Full Name of Registered  Operator/s | Company/Family Name | | | If in joint names (light vehicles only) insert both full names |
| Given Names | | |
| Residential/Company  Address |  | | | Postcode |
|  | | |
| Postal Address |  | | | Postcode |
|  | | |
| Mobile No. |  | | | |

Which have been: Lost Damaged Destroyed Stolen

(C:\Users\ka-cornish\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\L7NN5DY4\MC900434665[1].wmf box)

Other



Number of Plates Returned: **If 1 or 0 state reason**

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**Declaration by Registered Operator/s or Agent**

Details



I, (Full Name/s) do hereby   
declare that the Registration Certificate or Plate/s indicated above have been lost, damaged, destroyed, stolen, or other, as detailed, and I/We request a Replacement.

Signed  Date