

Motor Vehicle Modification Application

This application is to be completed by the person modifying the vehicle

Modifying a vehicle, using or permitting a modified vehicle to be used without approval from the Director-General Department of Transport is a breach of the *Transport Operations (Road Use Management) Act 1995*.

Vehicle modifier details

Name _____

Address _____

Postcode _____ Telephone _____

Vehicle owner details

Name _____

Address _____

Postcode _____ Telephone _____

Vehicle details

Registration number _____ Manufacturer _____ Model _____

Shape (eg. sedan, utility etc.) _____ Month and year of manufacture / Engine capacity _____ cc

Fuel type Petrol Diesel LPG Other (specify) _____

Front brakes Drum Disc Other (specify) _____ Rear brakes Drum Disc Other (specify) _____

V.I.N. or Chassis No. _____ Engine number _____

Australian Design Rule numbers (ADR's) stamped on compliance plate _____

Commercial vehicles
Unladen mass (Tare) _____ kg Laden mass (RGVM) _____ kg Combination mass (RGCM) _____ kg

Proposed modification details

All the sections below must be completed. For items which are not to be modified and are standard as fitted by the manufacturer, show as Standard

Chassis/frame/body Standard Modified Provide details _____

Suspension Front Standard Modified Provide details _____

Rear Standard Modified Provide details _____

Axles Front Standard Modified Provide details _____

Rear Standard Modified Provide details _____

Brakes Front Standard Modified Modified to? Drum Disc Make/Model _____

Width/Thickness _____ mm Diameter _____ mm

Rear Standard Modified Modified to? Drum Disc Make/Model _____

Width/Thickness _____ mm Diameter _____ mm

Steering Front Standard Modified Provide details _____

Proposed modification details (continued)

Wheel rims Front Standard Modified Provide details Width _____ mm Diameter _____ mm

Rear Standard Modified Provide details Width _____ mm Diameter _____ mm

Tyres Front Standard Modified Tyre type? Conventional Radial Other (specify) _____

Tyre size _____ Ply rating _____

Rear Standard Modified Tyre type? Conventional Radial Other (specify) _____

Tyre size _____ Ply rating _____

Track Front Standard Modified Provide details Width _____ mm
(Note track is measured from the centre of tread on one tyre to the centre of tread on the opposite tyre)

Rear Standard Modified Provide details Width _____ mm

Wheelbase Standard Modified Provide details Standard _____ mm Modified _____ mm

Transmission Standard Modified Provide details _____

Engine Standard Modified Provide details _____

Replaced Provide details of donor vehicle. Manufacturer _____

Model _____ Year of manufacture _____

Number of Cylinders/Rotors _____ Engine capacity _____ cc

Fuel type Petrol Diesel LPG Other (specify) _____

Engine number _____

ADR's on compliance plate of donor vehicle _____

Additional Information _____

Privacy Disclaimer - Queensland Transport collects information on this form under the *Transport Operations (Road Use Management) Act 1995* to manage the Queensland vehicle register. This information may be released by the department or its agents to vehicle insurers, statutory entities, lawyers, insolvency entities, persons involved in vehicle accidents/incidents or vehicle manufacturers and to or through interstate registering authorities. This information is also accessible by authorised departmental officers. Queensland Transport will not disclose your personal details to any other third parties without your consent or unless required by law.

Declaration

I hereby declare the above information to be true and correct.

 Signature of Applicant Date ____/____/____ Business Name (If applicable)

**This completed form is to be sent to Vehicle Standards and Safety Section,
 PO Box 673, Fortitude Valley, Qld 4006**

**For further information contact your nearest Queensland Transport Customer Service Centre.
 (refer to your local Telephone Directory)**

Office Use Only

Date received ____/____/____ File reference No. _____ Date approved ____/____/____

Date of final inspection ____/____/____ Confirmation letter forwarded _____
 Signature of approving officer