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Accident Towing Operator/Accident Towing Depot Manager Application for New Accreditation/Renewal of Accreditation



How to apply for a new Accident Towing Operator/Towing Depot Manager Accreditation/Renewal of Accreditation

To be able to manage an accident towing service business from a depot, you must be accredited.

To be accredited, you must apply to The Department of Transport and Planning. The Department of Transport and Planning will assess your application in accordance with the *Accident Towing Services Act 2007* and *Accident Towing Services Regulations 2019*.

The Department of Transport and Planning has 90 days to assess your application. If additional information is required, this period may be extended. The Department of Transport and Planning will advise you in writing if this is the case.

An application for Accident Towing Operator/Accident Towing Depot Manager Accreditation can be made by an individual or a company. To be a company the entity must be registered with the Australian Securities and Investments Commission (ASIC) and have an Australian Company Number (ACN), for example, LJNP Pty Ltd. An unincorporated body or association, including partnership, is not eligible to apply for an Accident Towing Operator/Accident Towing Depot Manager Accreditation.

If an application for Accident Towing Operator/Accident Towing Depot Manager Accreditation is being made by a Company, its nominated person will be responsible for the key duties of a depot manager. The nominated person can allocate staff or an agent to perform these key duties, provided the nominated person (as representative of the Company) retains responsibility for them.

Application Form

Complete and sign the Accident Towing Operator/Accident Towing Depot Manager Accreditation Form, making sure to tick the relevant box for a new or renewal application. Please complete every question on the form thoroughly. This will help The Department of Transport and Planning to assess your application and process it more quickly.

Submit Application

A non refundable application fee is payable to The Department of Transport and Planning. This fee is for processing your application. If you are successful, you will be issued with an Accident Towing Operator/Accident Towing Depot Manager accreditation certificate for up to five years. You need to download this form and fill in the correct sections. The form will need to be uploaded to **transport.vic.gov.au/towtrucks**, along with the supporting documentation to support your exemption application. You will have to pay a fee when you submit your documents. Once the application is submitted, you will receive a confirmation email from The Department of Transport and Planning.

National Police Certificate

A current National Police Certificate issued within the last six months is required. You can go to the Victoria Police website **police.vic.gov.au** to order the National Police Certificate, or you can use an online provider, who has been accredited by the Australian Criminal Intelligence Commission (ACIC). Certificates may take up to ten working days and the original certificate must be sent to The Department of Transport and Planning with your application.

Proof of Identification

To enable The Department of Transport and Planning to process your application, all those named on the application as Individual or Nominated people, and/or the signatories for a Company, are required to provide a copy of their driver's licence.

Privacy Statement

The Department of Transport and Planning is committed to protecting your privacy by fully meeting its responsibilities under the *Road Safety Act 1986*, *Privacy and Data Protection Act 2014* and the *Health Records Act 2001*. All personal information you provide will be handled in accordance with these requirements. The collection of information on this form is required by the *Accident Towing Services Act 2007*. Information held by The Department of Transport and Planning may be disclosed to various organisations, including the Victorian Civil and Administrative Tribunal and Victoria Police, in order to carry out their duties under the *Accident Towing Services Act 2007*.

The Department of Transport and Planning privacy statement can be accessed at transport.vic.gov.au.

Further Information

For assistance with completing this application form or for other enquiries about accident towing and Accident Towing Operator/Accident Towing Depot Manager accreditation, please: telephone The Department of Transport and Planning (03) 9881 8787, email accidenttowing@transport.vic.gov.au, or view tow truck industry information on transport.vic.gov.au.



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Section 1: Applicants Details			
Application for Accident Towing Operator (new)	Application for Accident Towing Operator (renewal)		
Application for Accident Towing Depot Manager (new)	Application for Accident Towing Operator (renewal) Application for Accident Towing Depot Manager (renewal)		
Section 1A Tow Truck Licences Held	Application for Accident Fewning Bop	ot managor (ro	noval
List all licence nos. e.g. TOW.999			
Section 1B Applicants Details – Company			
Company Name	ACN		
Registered Business Address of Company (this may be your accountant's address)			
and the second s		Р	ostcode
Depot Address		Р	ostcode
Postal Address (if different from above)		Р	ostcode
Telephone Facsimile	Email		
Section 1C Applicants Details – Individual & Nominated Person for the Compa	ny		
Surname/Family Name	Male	Female	
First Name	Second Name		
Name at Birth (if different to above)	Date of Bir	th D D	
Tow Truck DA No (if renewing)			
Residential Address		Р	ostcode
Postal Address (if different from above)		Р	ostcode
Tel (Home)	Tel (Business)		
Tel (Mobile)	Email		
 If this application is made by a Company, a relevant person is: any person who holds a share in the capital of, or an entitlement to receive income divirtue of that interest, is able to exercise a significant influence over, or with respect it relates; or any person who is entitled to exercise any power to participate in the management or appoint any person connected with the management of the business to which the any person who is a director, secretary, member of the committee of management or accreditation relates. a) I believe that each relevant person is a person of good character. b) I believe that each relevant person shall provide accident towing services in a man responsible, and law abiding. c) I believe that each relevant person noted on this application would be eligible to ap Accident Towing Depot Manager accreditation. 2.2 Appropriate Character (where the application is made in the name of an in a) I believe that I am a person of good character. b) I shall provide accident towing services in a manner that is safe, timely, efficient, responsible. 	to, the management of the activities to which to the activities to which the application or ne application or accreditation relates; or t, or connected with the management, of th mer that is safe, timely, efficient, ply for Accident Towing Operator/ individual)	the application the accreditat	or the accreditation
Section 3: Criminal Record Check			
The Department of Transport and Planning must be satisfied that an applicant is of a renewal of Accident Towing Operator/Accident Towing Depot Manager accreditation. A If you answer "Yes" to a question in this section, The Department of Transport and Pl The following questions do NOT apply to speeding fines or parking tickets. Queries of (03) 9881 8787. a) Are there any criminal charges pending against you?	any omissions or misleading information may	/ lead to your a ist in determini	pplication being refused. ng your application.
If yes, what is the offence or offences that you are currently charged with?			
b) Have you been found guilty of a criminal offence?If yes, what is the offence or offences that you were found guilty of? (attach a second second	and page if necessary)	Yes	O No



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c) If yes, have you told The Department of Transport and Planning about this finding of guilt in a previous application, Or during disciplinary action taken against you by The Department of Transport and Planning?				
d) Have you ever been refused or disqualified from applying or holding an Accident Tow Truck Operator or an Accident Tow Truck Depot Manager accreditation?		Yes No		
3.1 Where the applicant is a Company:				
a) Has the Company ever had a receiver or receiver and i	Yes No			
b) Has the Company been placed in administration?		Yes No		
c) Has a court made an order for the winding up of the Company?		Yes No		
	ords Record Check ords kept by Victoria Police, other Police Authorities, and The Depar information recorded against my name. This includes details of any			
	and any other matters, whether convicted or not, which may be de			
I undertake that I will at all times hereafter indemnify and keep indemnified the Chief Commissioner of Police and all employees of the Victoria Police, other Police Authorities and The Department of Transport and Planning against all actions, suits, proceedings, claims, demands, costs and expenses whatsoever which may be taken or made in respect of the release of any details of any convictions or any information relating to or involving me.				
Signature	Name of Applicant	Date		
sign the following certification. Applicants are warned that any person who gives false information when completing this form shall be guilty of an offence against section 215 of the <i>Accident Towing Services Act 2007</i> . If found guilty of an offence, a monetary penalty can apply. Please complete the certification by: • inserting your full name and date • signing where indicated • having it witnessed by an independent person. SECTION 5A: CERTIFICATION – COMPANY If the applicant is a Company, then the certification is required to be signed by: a) two directors of the company; or b) a director and a company secretary of the company; or c) in the case of a proprietary company that has a sole director who is also the sole company secretary, then that director.				
Name of Director	Signature of Director	Date D M M Y Y Y Y Y		
Name of Director/Secretary	Signature of Director/Secretary	Date D M M Y Y Y Y		
In the Presence of (Name of Witness)	Signature of Witness	Date D M M Y Y Y Y		
SECTION 5B: CERTIFICATION – INDIVIDUAL & NOMINATED PERSON FOR THE COMPANY I confirm that the information provided in this form is true and correct:				
Name of Applicant	Signature of Applicant	Date D M M Y Y Y Y Y		
In the Presence of (Name of Witness)	Signature of Witness	Date D M M Y Y Y Y		
Section 6: Important Note for all Applicants • The Department of Transport and Planning will consider your application incomplete if you fail to provide all of the required information, or if you have	Section 7: Checklist Prior to uploading your application form, please check that you have complete or provide the required documents may result in your applications 1A, 1B, 1C, 2, 3, 4, 5A and 5B.			

- provided incomplete or misleading information.
- If your application is incomplete, The Department of Transport and Planning will contact you to provide the required information.

Company: Sections 1A, 1B, 1C, 2, 3, 4, 5A and 5B

Individual: Sections 1A, 1C, 2, 3, 4 and 5B

- All sections relevant to your application are complete and questions answered.
- You have attached a copy of your driver's licence.
- You have, where applicable, attached the National Police Certificate.

Once the above steps have been completed, upload your application to:

transport.vic.gov.au/towtrucks



ABN 69 981 208 782

Accident Towing, GPO Box 2392, Melbourne, VIC, 3001 Call: (03) 9881 8787 Web: transport.vic.gov.au