Application for Veterans Card Victoria (VCV) discount

Applicant (veteran) details





Please complete this form to apply for a Veterans Card Victoria (VCV) discount. If your application meets all requirements, the VCV discount will be applied to your vehicle registration(s) and/or marine licence holding (as applicable). Further details at vicroads.vic.gov.au

Surname									
Given name(s)			Vic licence	/Customer no.					
Residential address						Post	code		
Postal address (if different from above)				Postcode					
Mobile phone no. (or other if not applicable)			Email						
Veterans Card Victoria discount Note: VCV card details will be validated		ermine a veteran's e	ligibility for	a VCV discount.					
Veterans Card Victoria (VCV)			VCV Card no.						
Department of Veterans' Affairs (DVA) Gold Card/DVA written confirmation			DVA Card no./Reference no.						
Veteran holdings									
Light motor vehicle/motorcycle	Registration no		Light Caravan	Registration	ı no				
Light trailer	Registration no		Marine Licence	Licence no					
Note: if you already have a DVA Gold Card/written confirmation from the DVA, use the Registration Concession form to get a registration discount of 50-100% and TAC discount of 50% for you or your spouse/domestic partner's light motor vehicle/motorcycle registration. Applicant (veteran) declaration I consent to this information being used by VicRoads to validate my entitlement to the VCV discount and its application to my registration or marine licence holding (as applicable). By signing this form, I declare that the information in this form and related supporting documents is true, correct and complete, and I understand the privacy statement.									
If applicable: I nominate to be the recipient of my VCV discount.									
Signature of applicant (veteran)				, , , , , , , , , , , , , , , , , , , ,	Date				
To be completed by spouse/domestic partner/carer (if applicable) Spouse/domestic partner/carer's holdings (light motor vehicle/motorcycle only)									
Spouse Domestic partner	Carer	Surname							
Given name			Vic lice	ence/Customer no.					
Residential address									
Postal address (If different from above)									
Mobile phone no. (or other if not applicable)			Email						
Registration number									
Spouse/domestic partner/carer of	declaration								
I am the Spouse Dome	estic partner Carer								
of the applicant and I give consent to revalidate my entitlement to a VCV discousupporting documents is true, correct a	unt for the vehicle registration	n listed above. By sign	gning this						
Signature of spouse/domestic partner/carer					Date D				

Privacy Statement

The Department of Transport and Planning ABN 69 981 208 782 ('Department') and R&L Services Victoria Pty Ltd ABN 28 657 005 493 (as Trustee for the Victorian R&L Services Trust ABN 96 342 123 072), known as 'VicRoads' and acting on behalf of the Secretary to the Department and Safe Transport Victoria (ST Vic) ('we, us') collect personal information for registration and licensing purposes. This personal information will be handled by us as permitted or required by the applicable laws. Particularly by the *Road Safety Act 1986* and *Marine Safety Act 2010*. We may disclose the information we collect about you to various organisations and persons as permitted or required by applicable laws, particularly by the *Road Safety Act 1986* and *Marine Safety Act 2010*. This includes the photograph and other information on your driver licence, learner permit or marine licence used for the purposes of biometric matching through the National Driver Licence Facial Recognition Solution for law enforcement, national security, and other purposes. It may also include any health information relating to your licence or registration, or sensitive information concerning any relevant criminal history. Your information may be disclosed to third parties including our contractors and agents, law enforcement agencies, other road and traffic authorities, Austroads, the Transport Accident Commission, concession and identity verification agencies (including Centrelink Confirmation eServices, the Department of Veterans' Affairs, Service Victoria, Registry of Births, Deaths and Marriages, and the Department of Foreign Affairs and Trade), vehicle manufacturers (for safety recalls), toll road operators, road safety researchers, courts and other organisations or people authorised to use the information.

Your failure to provide the information may result in this form not processed, or your records not being properly maintained. For further information about our use of your personal and health information, and your rights to access it, go to: dtp.vic.gov.au/privacy or ST Vic's Privacy Policy at https://safetransport.vic.gov.au/privacy-policy.

Providing false or misleading information or documents is an offence under the Road Safety Act 1986 and Marine Safety Act 2010, as applicable, and can result in you being fined or imprisoned. Further, any authority or approval, given as a result of you providing such information/documents, may be reversed and have no effect.

By signing this form, I declare that the information in this form and related supporting documents is true, correct and complete, and I understand the privacy statement.