



Request for Information by Solicitor

Motor vehicle accident claims

B

To check the current fees payable attend your nearest registry, service centre or call our Contact Centre on 13 22 13.
Hearing or speech impaired? Call us on the National Relay Service: TTY users phone 13 36 77 then ask for 13 22 13.
Speak and Listen users phone 1300 555 727 and ask for 13 22 13.

Attachments

HOW TO USE THIS FORM

- This form can only be used by solicitors to obtain the name and address of the owner of a vehicle involved in an accident in order for the solicitor to assess, commence or defend a legal claim concerning that accident.
- If you are not a solicitor, or if you require the information for a different purpose, or you require other information, then please lodge a [Form 5166 - GIPA Act Application](#) or, in case of litigation, serve a **subpoena**.
- If you want to obtain a copy of your own personal information please complete [Form 943 - Access to Personal Records Application](#).

1 Solicitor name

Law Society member number

Name of law firm

Address of law firm

Postcode

Phone number

Your reference number

Email address

2 Accident and vehicle details

Date of accident

Vehicle registration number

Licence number

Type of vehicle:

- Car
 Motor cycle
 Truck/Bus

Name of licence holder

Reason for requiring information

3 Solicitor's declaration

I,, Solicitor of Supreme Court of New South Wales hereby undertake that I will use the information provided by Roads and Maritime Services solely for the purpose of assessing, defending or commencing a legal claim in respect of a motor vehicle accident. I will not access or use the information for any other purpose including, but not limited to, debt recovery (other than to enforce a judgment arising from legal proceedings in respect of a motor vehicle accident).

Signature

Date

4 Type of Certificate Required:

(Please Tick Appropriate Box)

Section 257 of the Road Transport Act 2013.

vehicle

licence

(name of the operator of a NSW registered vehicle on a given date **or** driver licensing information)

Section 221 of the Motor Accidents (Compensation) Act 1999.

(name of the compulsory third party insurer of a vehicle on a given date, after 1 July 1989)

You must Include copies of proof of identity (POI) documents with your application or the request will not be processed.

A brochure detailing acceptable POI documents is available on the Roads and Maritime web site.

5 Privacy statement and applicant's declaration

Roads and Maritime Services is subject to the *Privacy and Personal Information Protection Act 1998* (PPIP Act) which requires us to comply with the Information Protection Principles set out in the PPIP Act.

Your personal information is being collected in order to request information in accordance with this form. The provision of your personal information is voluntary. However, failure to provide the information will result in the request not being processed.

Your personal information will be held by us at 20-44 Ennis Road, Milsons Point NSW 2061. You have the right of access to and correction of your information.

I declare that the information provided in this form is true and complete. I also consent to Roads and Maritime verifying any of the information provided in this form.

Signature

Date

Please do not send cash



Transport
Roads & Maritime
Services

Credit Card Payment Authority

Remember – Include your documents with this Authority

AMERICAN EXPRESS

DINERS CLUB

MASTERCARD

VISA

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------

Card number

<input type="text"/>	/	<input type="text"/>
----------------------	---	----------------------

Valid until

<input type="text"/>

Card holder's name

\$ <input type="text"/>

Amount

My supply of Credit Card information is voluntary and I understand that my 'personal information' may be disclosed inside and outside NSW to Roads and Maritime Services Bank and my financial institution for the purpose of administration and processing Credit Card Payment.

<input type="text"/>

Signature of card holder

Take the completed request for information application to your nearest registry/service centre or send it to:

Roads and Maritime Services
Certificates Unit
Locked Bag 14
Grafton NSW 2460 Australia

If payment is being made using the credit card payment authority you may also submit your application by fax on +61 02 6640 2895 or via email to customeradministrationunit@rms.nsw.gov.au

You must include copies of proof of identity (POI) documents with your application or the request will not be processed.

A brochure detailing acceptable POI documents is available on the Roads and Maritime web site.

Office use - BUNDLE B Registration

Mailing address checked on DRIVES (if applicable)

Proof of Identity Record

Stand alone or primary proof

Document number

<input type="text"/>

<input type="text"/>

Secondary proof (if necessary)

Document number

<input type="text"/>

<input type="text"/>

Certified by

Customer service representative name (print)

<input type="text"/>

Registry/service centre

<input type="text"/>

Customer service representative signature

<input type="text"/>

Staff number

<input type="text"/>

Date

<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>
day		month		year