

Application for Accreditation to drive a Commercial Passenger Vehicle / Private Bus

OFFICE USE ONLY

VTD or VicRoads Officer must complete this section when determining an application.

Proof of Identity

Driver Licence sighted Second proof (type) Number

As a delegate for the Director of Public Transport, I have determined this application in accordance with the relevant provisions of the *Transport Act 1983* as follows:

Issue Full Accreditation Issue Temporary (12 months) Accreditation

Refuse Accreditation

Accreditation Currency Period

From To

Officer's name (print) Officer's Signature Date

Accreditation No.

DC

OFFICE USE ONLY

Instruction to Applicants

1. Complete pages 1 and 2 of this form in BLOCK LETTERS in your own handwriting and sign and date in the spaces indicated.
2. As a requirement of driver accreditation you must have a medical assessment to ensure your fitness to drive a commercial passenger vehicle (CPV) or private bus. Please see detailed instructions on the attached Medical Assessment for Drivers form (**DA MA FORM**). The examining doctor/optometrist will complete the relevant parts of page 3 of this form and retain all medical papers including your questionnaire responses and clinical findings. The details of your medical assessment will be treated as confidential and will only be reported to the Director of Public Transport (DPT), officers of the Department of Transport (DOT) and VicRoads. No information will be disclosed to any other person or organisation without your permission, except where disclosure is required:
 - by law, or
 - by a subpoena; or
 - for an investigation by a government agency into an accident or incident.
3. Applicants are warned that any person who gives false information when completing this form shall be guilty of an offence against the *Transport Act 1983*.

Signature of Applicant Date

Motor Vehicle Driver Licence Details

Driver Licence Number Expiry Date

How long have you held a Victorian Driver licence? Years

Is your licence Probationary? Yes No

Licence Category Held (Please tick)

- Car LR (Light Rigid) R (Rider)
 MR (Medium Rigid) HR (Heavy Rigid)
 HC (Heavy Combination) MC (Multi Combination)

Personal Details

Surname/Family Name

First Name/Given Name Second Name 3rd Initial

Name at Birth if different to above

Residential Address
 Postcode

Postal Address - if different to above
 Postcode

Telephone - Business Telephone - Private

Male Female Date of birth

Driver Accreditation Details

Have you ever applied for or held a driver's certificate/driver accreditation to drive a commercial passenger vehicle/private bus? Yes No

What class of vehicle are you seeking to drive?

- Metropolitan Taxi or Hire Car
 Urban Taxi or Hire Car
 Country Taxi or Hire Car
 Special Purpose Vehicle or Restricted Hire Car
 Restricted Hire Motorcycle
 Buses Operated by persons accredited by the Department of Transport

What is the maximum seating of such a vehicle? Seats

Persons driving buses in declared Hazardous Areas must obtain additional authorisation from VicRoads

Victorian Taxi Directorate

Application for Accreditation to drive a Commercial Passenger Vehicle / Private Bus Authority for Information (Applicant to complete)

Details of Applicant (Please use BLOCK letters)

Surname / Family Name	First Name / Given Name	2nd Initial	
Address	Suburb	Postcode	Driver Licence Number

Answer "Yes" or "No" to the following questions. If you answer "yes" to any question give details in the space provided. Particular care should be taken in providing complete details of your personal record as any omissions or misleading information may lead to your application being refused.

MEDICAL HISTORY

1. Are you subject to providing Medical Reports to VicRoads to hold a driver licence? Yes No

TRAFFIC OFFENCES

2. Have you in Victoria or elsewhere, ever been fined or convicted for any traffic offences? Yes No

3. Has your driver licence ever been suspended or cancelled for any reason? Yes No

4. Have you ever been notified that you have incurred demerit points for traffic offences? Yes No

If so, state number of points incurred.

5. Have you been charged with any traffic offence/s where the charge/s has not yet been determined? Yes No

Year	Details of Traffic Offences in questions 2 to 5 above (attach sheet if space insufficient)	Court	Penalty

CRIMINAL OFFENCES

6. Have you in Victoria or elsewhere, ever been fined, convicted, or have had a finding of guilt made against you by a court for any other offences whatsoever? Yes No

7. Have you ever been placed on a good behaviour bond, community based order or on probation by a court of law? Yes No

8. Have you been charged with any criminal offence/s where the charge/s has not yet been determined? Yes No

9. Are you subject to any reporting obligations under Part 3 of the *Sex Offenders Registration Act 2004* (Vic) or an extended supervision under Part 2 of the *Serious Sex Offenders Monitoring Act 2005* (Vic)? Yes No

Year	Details of Criminal Offences in questions 6 to 9 (attach sheet if space insufficient)	Court	Penalty

I hereby consent to the ongoing checking by the DPT and DOT of criminal or other records kept by Victoria Police or VicRoads and the release of information recorded against my name, including any matters, whether convicted or not, which may be deemed to be relevant to me holding a driver accreditation.

I have listed details of any charges pending, charges proven or convictions against me for any criminal offence, either in Victoria or elsewhere.

I undertake that I will at all times hereafter well and sufficiently indemnify and keep indemnified the Chief Commissioner of Police and all employees of the Victoria Police all liability and against all actions, suits, claims, demands, costs and expenses whatsoever which may be taken or made in respect of the release of any details of any convictions or other information relating to or involving me.

Signature of Applicant	Date
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Protecting your privacy

The Department of Transport (DOT) is committed to protecting your privacy by fully meeting its responsibilities under the *Information Privacy Act (Vic) 2000* and the *Health Records Act (Vic) 2001*. The document titled Privacy Statement sets out DOT's privacy policy.

Department of Transport

Victorian Taxi Directorate, PO Box 666, NORTH MELBOURNE VIC 3051 Phone (03) 9320 4300 toll free for country callers: 1800 638 802.
www.taxi.vic.gov.au



Victorian Taxi Directorate

Part 1. Medical Certificate – Assessment of Fitness to Drive

To be completed by a registered medical practitioner only and returned to applicant.

NOTE: The applicant should provide the examining registered medical practitioner with a Medical Assessment for Drivers form.

Patient/Applicant Details (Please use BLOCK LETTERS)

Surname/Family Name		First Name/Given Name	
Date of birth	/	/	Driver Licence Number

Were you familiar with the patient's medical history prior to this examination? Yes No

I certify that I have examined the above mentioned patient (who intends to drive a commercial passenger vehicle and/or private bus) in accordance with the relevant National Medical Standards for Commercial Vehicle Drivers as set out in *Assessing Fitness to Drive, 2003*. In my opinion the person subject of this report:

- Meets the relevant medical criteria for an unconditional licence and requires no further assessment. **(No further information required)**
- Does not meet the medical criteria for an unconditional licence or a conditional licence. **(Provide details of criteria not met in space below)**
- Does not meet the medical criteria for an unconditional licence but may be suitable for a conditional licence based on information noted below. **(Provide details of criteria not met, proposed restrictions, suggestions for management and periodic review in space below)**. Note: A conditional licence will not be issued unless adequate supporting information is provided by the examining medical practitioner.
- Requires appropriate specialist assessment. **(Provide details of type of specialist recommended/referred to in space below)**
- Requires practical driving test. **(Provide details of type of practical assessment required in space below)**
- Requires occupational therapist assessment. **(Provide details of specialist recommended/referred to in space below)**
- Previously unlicensed or on conditional licence but condition has now improved so as to meet criteria for a conditional or unconditional licence. **(Provide details of criteria previously not met; the response to treatment and prognosis, duration of improvement; other relevant information including consideration of the driving task, in space below)**

Details of medical criteria not met; restrictions; management; review periods and requirements for further assessment (attach additional information if required)

Part 2. Vision Acuteness Certificate

To be completed by a registered medical practitioner or a registered optometrist.

I certify that I have examined the vision acuteness of the above mentioned patient (who intends to drive a commercial passenger vehicle and / or private bus). In my opinion the person subject of this report:

- Meets the minimum acceptable standard of 6/12 (Snellen) in each eye separately.
- Does not meet the minimum acceptable standard of 6/12 (Snellen) in each eye separately.

Details of Vision Acuteness Test (Snellen Code)	Unaided		Aided	The minimum acceptable standard is 6/12 (Snellen) in each eye separately
	Right Eye	6/	6/	
Left Eye	6/	6/		

Registered Medical Practitioner Details (Please use BLOCK LETTERS)

Registered Optometrist Details, if applicable. (Please use BLOCK LETTERS)

Date of Examination	Reporting Professional's Name	Signature

Practice Address

		Postcode	
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Telephone Fax

Note: The publication *Assessing Fitness to Drive 2003* is available from Austroads on Tel: (02) 9264 7088 or at www.austroads.com.au

Consent of Patient / Applicant

I, the above named patient and applicant for a driver accreditation consent to the examining medical practitioner / optometrist providing information to the DPT, DOT and / or VicRoads, and I understand that I shall be responsible for any medical expense incurred in connection with the compilation of the above Medical Certificate.

Signature of Applicant	Date
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Department of Transport

Victorian Taxi Directorate, PO Box 666, North Melbourne VIC 3051 Phone: (03) 9320 4300 Toll free for country callers: 1800 638 802
www.taxi.vic.gov.au



Privacy Statement

How the Victorian Taxi Directorate (VTD) manages information about you.

What is this statement about?

This statement is about how we, the VTD, collect, store, maintain, use, and disclose your personal information, sensitive information and health information, and how we will protect your privacy in doing so.

What is personal information?

Personal information is recorded information about you from which you can reasonably be identified.

What is sensitive information?

Some personal information is sensitive information such as information about your race, ethnicity, political opinions or memberships, religious beliefs or affiliations, philosophical beliefs, memberships of professional/trade unions or associations, sexual preferences or practices, or criminal record. We are especially protective of your privacy in collecting sensitive information, as explained below.

Managing sensitive information

Since sensitive information is also personal information, we will manage it in accordance with all the principles for managing personal information. But since it is sensitive, we will follow extra principles restricting when we may collect it. We may only collect sensitive information about you if:

- (a) you consent; or
- (b) you are incapable of giving consent, but we need the information to lessen or prevent a serious and imminent threat to a person's life or health; or
- (c) we cannot practicably seek your consent, but the government needs the information to target its welfare or educational services; or
- (d) the law requires us to collect the information; or
- (e) we need the information to conduct or defend legal action.

What is health information?

Health information is information, whether true or false, about your physical, mental or psychological health, any disability you may have, your expressed wishes about the future provision of health services to you, the donation of body parts, organs or body substances by you, or genetic information about you in a form which is or could be predictive of your or any of your descendants' health.

Supplying taxi, commercial passenger vehicle, private bus or driving instructor services

If you are, have been, or seek to become involved in the supply of taxi, commercial passenger vehicle, private bus or driving instructor services, we may collect or use your personal or health information or disclose it to organisations and governmental agencies. We may do so if necessary to determine, or help another governmental agency determine:

- (a) whether you are, were, or will be suitable to be involved in the supply of taxi, commercial passenger vehicle, private bus or driving instructor services; or
- (b) whether you have broken the law in the course of your involvement in the supply of taxi, commercial passenger vehicle, private bus, or driving instructor services.

Some organisations that we may disclose your personal or health information to are; taxi depots/associations, bus depots/associations, driving instructor associations, and relevant state and federal governmental agencies.

Security cameras in taxis

If you have been a passenger in, or drive a taxi, you may have been photographed by a security camera installed in the taxi. If you were, those photographs may contain your personal information. We may collect or use that information, or disclose it to a law enforcement agency if necessary to determine, or help a law enforcement agency determine:

- (a) whether a crime has been committed by or against you; and/or
- (b) your identity, if a law enforcement agency suspects that a crime has been committed by or against you.

Multi Purpose Taxi Program Members

If you are, have been, or seek to become a member of the Multi Purpose Taxi Program, we may collect or use your personal or health information, or disclose it to another governmental agency, medical practitioner or independent health panel. We may do so if necessary to determine, or help another governmental agency determine, whether you are, were, or will be eligible to be a member of the Multi Purpose Taxi Program.

How we collect personal and health information

If we need personal or health information about you, we will, where practicable, collect it only from you. But whomever we collect it from; we will collect it lawfully, fairly, and without unreasonable intrusion. At the time the information is collected we will advise you in general terms if any other organisations will have access to your personal or health information, and whether there are any consequences of not providing information.

Security of information

We will take reasonable steps to protect your personal information from improper use, loss, access, modification, or disclosure. When we no longer need your personal information, we will take reasonable steps to destroy it or to modify it so that you cannot reasonably be identified from it.

Quality of information

If we collect, use, or disclose your personal information, we will take reasonable steps to ensure that it is accurate, complete, and up to date. If your personal information changes, please advise us.

Correcting your information that we hold

If you can establish that your personal information that we hold it is not accurate, complete, and up to date, we will take reasonable steps to correct, complete, or update it as required.

Accessing your information that we hold

When?

We will grant you access to your personal information that we hold, unless doing so would: pose a serious and imminent threat to the life or health of any individual; unreasonably invade someone else's privacy; be vexatious or frivolous; interfere with the enforcement of the law; reveal the intention of negotiations between you and us and prejudice these; be unlawful; or if denying access is required or authorised by law. You can contact us on (03) 9320 4300 or 1800 638 802 (toll free for country callers), or via www.taxi.vic.gov.au.

continued overleaf

Privacy Statement continued

How the Victorian Taxi Directorate (VTD) manages information about you.

Access requests under the *Freedom of Information Act 1982*

Where your request for access involves information about an event, commercial activity or affects someone else's privacy, we may require you to make the request under the *Freedom of Information Act 1982* (Vic). Our Freedom of Information Officer can be contacted on (03) 9655 6380.

Sending information out of Victoria

We will not disclose or transfer your personal information to a person, governmental agency or organisation outside Victoria, unless we reasonably believe that the recipient will manage the information in accordance with principles substantially similar to the principles set out in this statement or you give your consent.

Anonymity

You may deal with us anonymously, where lawful and practicable.

Unique identifiers

What is a unique identifier?

A unique identifier is a number or other code that identifies only you, such as a driver's licence number or tax file number.

When may we assign a unique identifier?

If you are, have been, or seek to become:

- (a) involved in the supply of taxi services; or
- (b) a member of the Multi Purpose Taxi Program; we may assign you a unique identifier if necessary to efficiently identify you in our records.

When may we disclose a unique identifier?

If you are or have been involved in the supply of taxi services, we may disclose your unique identifier to an organisation or another governmental agency. We may do so if necessary to determine, or help a law enforcement agency to determine whether a crime was committed by or against you.

Privacy Complaints

If you suspect that we have mismanaged personal information about you, or have interfered with your privacy please contact our Privacy Officer:

Telephone: (03) 9655 8803

Mail: The Privacy Officer, Department of Transport,
P.O. Box 2797, Melbourne VIC 3001

Internet: visit www.transport.vic.gov.au to download a complaint form

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