

Renewal Application

Motor Vehicle Yard Manager's Licence

USE ADOBE ACROBAT READER WITH THIS FORM



This form is designed to be used with the FREE Adobe Acrobat Reader application. [Click here to download Acrobat Reader.](#) Alternatively the form can be printed and completed by hand, scanned and submitted (with all attached documents).

Application Checklist

Your application can only be processed if **ALL** of the relevant information and supporting documentation is provided. Use this checklist to ensure that you complete all parts of your application and have all necessary supporting documents ready to attach. Please check that:

- all sections of this form are complete;
- your Australian police check is ready to attach; and
- payment of the prescribed fee, including any applicable late fee, is ready to be made.

Application fee

Please refer to our website for the [current prescribed fees](#).

Applications received within 28 days after the expiry date of the licence will be accepted but will incur a late fee. Applications received more than 28 days after the expiry date cannot be accepted.

The fee is **non-refundable**, exempt from GST and subject to change without notice. Part payment cannot be accepted. Cheques should be made payable to the Commissioner for Consumer Protection.

Lodgement options

In person

Customer Service
Level 1, Mason Bird Building
303 Sevenoaks Street CANNINGTON
Hours: 8:30am to 4:30pm, Monday to Friday

By post

Licensing Services
Department of Local Government, Industry
Regulation and Safety
Locked Bag 14
CLOISTERS SQUARE WA 6850

Enquiries

Licensing Advice Line: 1300 304 064
Licensing Email: cplicensing@lqirs.wa.gov.au
Overseas Callers: +61 8 6251 2969

General Enquiries: 1300 304 054
Web Site: www.wa.gov.au/organisation/service-delivery/consumer-protection-licensing-and-registration

Credit card payment details

Card Type Visa Mastercard (only Mastercard and Visa accepted)

Card Number

Cardholder Name Expiry Date

Cardholder Signature: Date Contact Number

I authorise the Department to deduct the current prescribed fee*

OFFICE USE ONLY

Licence No	Department Code	MY	Chart Description	Renewal	Chart Key	<input checked="" type="checkbox"/>
Total Fee	\$	Link to Licence	Late Fee	Yes <input type="checkbox"/> No <input type="checkbox"/>		

Renewal Application: Motor Vehicle Yard Manager's Licence

Licence holder details

Licence number:	MY	<input type="text"/>
Full legal name:	<input type="text"/>	
Personal email address:	<input type="text"/>	
Mobile number:	<input type="text"/>	

We use email/SMS for contact purposes and to send courtesy renewal reminders, so it is important that you notify the Commissioner should your electronic contact details change.

Residential address

Street address:		
<input type="text"/>		
Suburb:	State:	Postcode:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Postal address (if different to above)

Street address:		
<input type="text"/>		
Suburb:	State:	Postcode:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Employer statement

This section must be completed by the holder of the dealer's licence or a licensed yard manager who works for the employing dealer. Administrative staff and licensed salespersons cannot sign this statement.

NOTE: A licence cannot be renewed unless the salesperson is employed by a licensed motor vehicle dealer at the time of making the application or will be employed by a licensed motor vehicle dealer upon renewal of the licence.

As the representative of the employing dealership, by signing this form you are declaring that you employ or intend to employ the applicant as a Motor Vehicle Salesperson and understand that providing false and misleading information in an application is an offence.

Employing Dealer information	Licence Number	MD		
	Name of Dealership			
Information of person signing this employer statement	Full Name			
	Position held at the Dealership			
	Signature		Date	

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Fitness to hold a licence

You must provide an Australian police check in your full legal name which is less than three (3) months old. Information about our [current police check requirements](#) can be found on our website.

Please answer either 'Yes' or 'No' to the following questions. If the answer to any of the questions is 'Yes', you may be contacted to provide additional information as part of the application process.

Since your last application, have/are you:

- | | |
|---|--|
| 1. been convicted or found guilty of any offences, including convictions which resulted in a suspended sentence? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <i>Include all offences which went to Court, including traffic offences. Do not include spent convictions.</i> | |
| 2. aware of any legal proceedings currently pending against you for an offence, including proceedings by way of appeal or review? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 3. been the subject of any adverse findings by a Government Board, Tribunal or Agency (e.g. the Corruption and Crime Commission)? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 4. had any occupational licence or application refused, cancelled or suspended? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 5. been disqualified from holding any occupational licence? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 6. been subject to any disciplinary action by a licensing authority? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 7. had any investigations or legal proceedings commenced against you or an associated entity which may result in action being taken in relation to an occupational licence currently held? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 8. been known by any other name? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 9. no longer permitted to work and/or remain in Australia? | Yes <input type="checkbox"/> No <input type="checkbox"/> |

Authorisation and Declaration

In order to assist with the determination of this application, I authorise the Commissioner, or persons so directed, to obtain on my behalf any document, record, file or information that may be necessary and relevant to consider my fitness and propriety to hold a licence, including but not limited to records relating to my criminal history or current/previous occupational licences or other relevant information.

Further, I declare that the information and documents given with or in support of this application, whether or not provided at the time of or subsequent to lodgement, are true and correct. I understand that providing a false or misleading statement in an application is an offence.

Applicant's full name:

Signature: Date: