

Important notes

- **When to use this form:** use this form for the limited application purpose noted below to obtain (1) the name and address of the owner of a vehicle or its CTP insurer and/or (2) the address of a driver. In each case you must be able to correctly identify the vehicle or driver in question before your request can be considered
- **Eligibility:** only a lawyer with a current practicing certificate can use this form
- **Application purpose:** the purpose of the applicant must be solely to commence or defend a legal claim (or enforce a resulting judgment) on behalf of a client in respect of a motor vehicle accident or to identify a CTP insurer in connection with a motor vehicle accident
- **Other purposes:** if you require information for other purposes then you must issue a subpoena or summons for preliminary discovery under Part 5.2 of the Uniform Civil Procedures Rules 2005 or seek a third party direction under subsection 100(1A) of the *Motor Accidents Compensation Act 1999* or section 7.43 of the *Motor Accident Injuries Act 2017*

1 Applicant details

Solicitor name

Law Society member number

Name of Law Society (include state/territory)

Name of your law firm/community legal centre/employer

Address of law firm (must not be a PO address)

Postcode

Phone number (w)

Phone number (m)

Note: Must be an office number at your law firm

Your firm's/employer's file reference number for this matter

Email address (this must be your work address)

Your application may be rejected if the email domain does not match the name of your law firm/employer or community legal centre. Personal email addresses are not acceptable.

2 Accident details

Date

day / month / year

Nature of accident (must involve damage/injury caused by a vehicle)

Police reporting

Did the accident involve any of the following?

- Yes No injuries or fatalities
 Yes No (alleged) intoxicated driver
 Yes No driver refusing to exchange licence and contact details

If you answered **yes** to any of the above then you must report the incident to the police and provide a Police Event Number and indicate which police force you reported to

Police Event Number

Police jurisdiction

- NSW VIC WA AFP QLD
 TAS NT ACT SA

3 Information requested

I am applying for the following information as at the date of accident noted above:

(**Note:** tick as many of the following boxes as apply):

- the name and address of the registered operator (owner) of a NSW vehicle involved in an accident
 the address of a driver of a vehicle involved in a vehicle accident
 name of the Compulsory Third Party (CTP) insurer of a vehicle involved in a motor vehicle accident
 Please provide an Evidentiary Certification under s.257 *Road Transport Act 2013*

Note: s.257 certification attracts a further fee. Unless you need to prove the information in court this certification should not be required

4 Vehicle details

- **Skip section 4 and proceed straight to section 5 if you only require the address of a driver**
- if the vehicle type of make/model or colour do not match the registration number you provide we may refuse to provide information because of the risk that you have provided an incorrect registration number
- we cannot provide information on interstate vehicles

NSW vehicle registration number

Vehicle type (tick)

- Car Taxi Motor cycle Truck Trailer Bus
 Caravan Other (provide details)

Vehicle make (manufacturer)

Vehicle colour

Note: where a colour can be described differently please indicate (e.g. "silver" or "grey")

5 Driver details

- **Ignore section 5 if you are seeking vehicle owner details or insurance company details**
- we can only provide the address of a driver involved in a motor vehicle accident if you provide their name and NSW driver licence number so that we identify the correct person

Driver name

NSW Driver Licence number

6 Solicitor declaration & undertaking

I declare the following to be true and I acknowledge that Transport for NSW relies on this declaration for the purpose of releasing the information that I seek:

- I am a lawyer holding a current Australian legal practising certificate
- I am seeking the requested information in connection with a motor vehicle accident involving the vehicle and/or driver whose details I have provided in this application
- I undertake to only use the requested information in order to either:
 - (a) identify the CTP Insurer in respect of a vehicle in an accident **or**
 - (b) commence or defend legal proceedings (including issuing a letter of demand) in respect of a motor vehicle accident or enforce a judgment arising out of those vehicle accident proceedings

I am making this application in my **professional capacity as a lawyer** acting for either:

- a client of my law firm **or**
- a client of a community legal centre where I am employed or volunteer **or**
- my employer - i.e. I hold a corporate or government practising certificate and I am employed as a corporate or government lawyer (e.g. insurance company lawyer)
- I am not making this application in any personal capacity either for myself or outside of my professional capacity or employment as a lawyer
- I have either completed this application personally or I have checked it to satisfy its correctness.

Lawyer's signature

Date

day	/	month	/	year
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Warning

If you breach the undertaking provided above or provide false or misleading information then Transport for NSW may seek professional sanctions against you by the Law Society and/or prosecution under s.307B of the *Crimes Act 1900*

7 Lodgement

Send the following to info@transport.nsw.gov.au

-  Application form
-  Your current legal practising certificate
-  Completed credit card authority ([Form 5623](#)) for the application fee

Notes:

- You must send all 3 documents together
- You must lodge this application from your professional (work) email address
- [Form 5623](#) provides a link where you can find (1) current application fee and (2) the additional fee should you seek a s.257 evidentiary certificate

Personal Information Collection Notice

Transport for NSW is committed to protecting your privacy and ensuring your personal and health information is managed according to law.

Find out why we collect your personal information and how we use and manage it by reading our privacy statement at transport.nsw.gov.au/privacy-statement or phone **13 22 13** to request a copy.