



# Taxi/Limousine Service Licence Notification of Transfer/Lease and Management/Renewal of Lease and Management

This form is to be used when advising of the:

- transfer of a service licence
- lease/management of a service licence
- renewing lease/management agreements.

Lodge (and sign this application form at your nearest Department of Transport and Main Roads Customer Service Centre). If there is no local departmental office, this application can be lodged (and signed) at a police station or magistrate's court.

## Declaration

The statement (on page 6) must be signed by all persons whose names appear on this application in the presence of a Department of Transport and Main Roads authorised officer or police officer (if there is no local departmental customer service centre or TransLink office).

Licence owner to complete the following sections Q1, Q2, Q3 and the following section/s if applicable Q4, Q5, Q6, Q7

## Document checklist

### Corporations

Attach certificate/s of corporation, including a certified list of the current directors ☐

### Licence transfers

Licence documentation ☐  
Letter from financial Institution (if applicable) ☐  
Stamped transaction instrument \* ☐

### Replacing a vehicle

Current vehicle  
Registration plates ☐

### Replacement vehicle

Certificate of inspection ☐  
Registration documents ☐  
CTP insurance documents ☐  
Gas certificate (if applicable) ☐

\* Note: Stamped transaction instrument is a document provided by the Office of State Revenue to ensure you have paid stamp duty.

## 1 Licence details

Taxi ☐ Limousine ☐

Service licence area

Department of Transport and Main Roads service licence number

Name on licence – personal or corporation

Address on licence – residential or postal

  
Postcode

Day time contact telephone number

Signature

Date

Continued next column...

## 2 Vehicle details

Vehicle currently operating on this licence

Vehicle registration number

Make and model (for example, Toyota Camry)

Month and year manufactured (for example, 6/07)

Passenger seating capacity (excluding driver)

Front		Rear	
-------	--	------	--

Is this vehicle wheelchair accessible?

No ☐ Yes ☐ Number of wheelchairs

Is this vehicle to be replaced by another vehicle?

No ☐ Yes ☐ Complete details below

Replacement vehicle registration number

Make and model (for example, Ford Fairlane)

Month and year manufactured (for example 4/95)

Passenger seating capacity (excluding driver)

Front		Rear	
-------	--	------	--

Is this vehicle wheelchair accessible?

No ☐ Yes ☐ Number of wheelchairs

## 3 Notification type/s

Transfer of a service licence ☐ Complete 4 (page 2)

Management/management renewal of a service licence ☐ Complete 5 (page 3)

Lease/lease renewal of a service licence ☐ Complete 6 (page 4)

Notification of any other type of agreement pertaining to the lease/management of a service licence ☐ Complete 7 (page 5)

Continued over page...

**4 Complete for transfer of service licence****The licence documentation must be provided with this notification.****Sale/purchase details****Are there any loans outstanding in relation to this licence?**Yes ☐ A letter from the financial institution concerned must be submitted with this application.

Name of financial institution with the outstanding loan

No ☐**Sale price details**

The stamped transaction instrument must be submitted with this application.

Item	Value
Vehicle	\$ <input type="text"/>
Shares/Base fees	\$ <input type="text"/>
Equipment	\$ <input type="text"/>
Licence value	\$ <input type="text"/>
<b>Total sale price</b>	\$ <input type="text"/>

**Does the purchaser intend to obtain finance for this licence?**Yes ☐ Name of financial institution from which finance will be obtained

Advice from the financial institution concerned must be submitted with this application.

No ☐**New licence owner's details**Corporation ☐ Business ☐ Partnership ☐ Individual ☐

Corporation name (if applicable)

Australian Company Number (ACN):

**Note:** Evidence of corporation name (for example, Certificate of Incorporation including a certified copy of the list of current directors (available from the Australian Securities and Investments Commission) must be attached.

Does the company currently hold Operator Accreditation?

Yes ☐ Operator Accreditation numberNo ☐

Business name ('trading as') (if applicable)

Australian Business Number (ABN):

State:

Address

Postal address (if same as above, write 'as above')

Daytime telephone number

Contact fax number (if applicable)

**Personal details**

To be completed and signed by individual licence owners, partnerships, or corporate directors.

**First person's details**

Family name

Male ☐Female ☐

Given name/s

Date of birth

Place of birth

Residential address

Postcode

Postal address (if same as residential, write 'as above')

Postcode

Telephone (private)

Telephone (business)

**Do you currently hold Operator Accreditation?**Yes ☐ Operator Accreditation numberNo ☐**Note:** You will need to have a Driver Authorisation if you intend to drive the vehicle.

Signature

Date

**Second person's details – if applicable**

Family name

Male ☐Female ☐

Given name/s

Date of birth

Place of birth

Residential address

Postcode

Telephone (private)

Telephone (business)

**Do you currently hold Operator Accreditation?**Yes ☐ Operator Accreditation numberNo ☐**Note:** You will need to have a Driver Authorisation if you intend to drive the vehicle.

Signature

Date

**If there are more than two people, attach details on a separate sheet.****Continued over page...**

**5 Complete for notification of licence management****Notification type**Renewal of an existing management agreement ☐New management agreement ☐**Period of management agreement**
 /  /  to  /  / 
**Who is this licence to be managed for?**The licence holder ☐The lessee ☐**Manager's details**Corporation ☐ Business ☐ Partnership ☐Individual ☐

Corporation name (if applicable)


Australian Company Number (ACN):

**Note:** Evidence of corporation name (for example, Certificate of Incorporation including a certified copy of the list of current directors (available from the Australian Securities and Investments Commission) must be attached.

Does the company currently hold Operator Accreditation?

Yes ☐ Operator Accreditation number
No ☐

Business name ('Trading as') (if applicable)


Australian Business Number (ABN):

State:

Address


Postcode

Postal address (if same as above, write 'as above')


Postcode

Day time telephone number

Fax number (if applicable)



Licence owner's name

Operator Accreditation number

Signature

Date

 /  / 
**Personal details**

To be completed and signed by individual, partnerships, or corporate directors.

**First person's details**

Family name

Male ☐

Female ☐

Given name/s

Date of birth

Place of birth

 /  / 


Residential address


Postcode

Postal address (if same as residential, write 'as above')


Postcode

Telephone (private)

Telephone (business)


**Do you currently hold Operator Accreditation?**Yes ☐ Operator Accreditation number
No ☐**Note:** You will need to have a Driver Authorisation if you intend to drive the vehicle.

Signature

Date

 /  / 
**Second person's details – if applicable**

Family name

Male ☐

Female ☐

Given name/s

Date of birth

Place of birth

 /  / 


Residential address


Postcode

Telephone (private)

Telephone (business)


**Do you currently hold Operator Accreditation?**Yes ☐ Operator Accreditation number
No ☐**Note:** You will need to have a Driver Authorisation if you intend to drive the vehicle.

Signature

Date

 /  / 
**If there are more than two people, attach details on a separate sheet.****Continued over page...**

**6 Complete for notification of licence lease****Notification type**Renewal of an existing lease agreement ☐New lease agreement ☐**Period of lease agreement**
 /  /  to  /  / 
**Lessee's details**Corporation ☐ Business ☐ Partnership ☐Individual ☐

Corporation name (if applicable)


Australian Company Number (ACN):

**Note:** Evidence of corporation name (for example, certificate of incorporation including a certified copy of the list of current directors (available from the Australian Securities and Investments Commission) must be attached.

Does the company currently hold Operator Accreditation?

Yes ☐ Operator Accreditation number
No ☐

Business name ('trading as') (if applicable)


Australian Business Number (ABN): State:

Address


Postal address (if same as above, write 'as above')


Day time telephone number

Fax number - (if applicable)

**Licence owner to complete section below**

Licence owner's name

Operator Accreditation number

Signature

Date

 /  / 
**Personal details**

To be completed and signed by individual, partnerships, or corporate directors.

**First person's details**Family name Male ☐

Female ☐

Given name/s

Date of birth

 /  / 

Place of birth

Residential address


Postcode

Postal address (if same as residential, write 'as above')


Postcode

Telephone (private)

Telephone (business)

**Do you currently hold Operator Accreditation?**Yes ☐ Operator Accreditation number
No ☐

**Note:** You will need to have a Driver Authorisation if you intend to drive the vehicle.

Signature

Date

 /  / 
**Second person's details – if applicable**Family name Male ☐

Female ☐

Given name/s

Date of birth

 /  / 

Place of birth

Residential address


Postcode

Telephone (private)

Telephone (business)

**Do you currently hold Operator Accreditation?**Yes ☐ Operator Accreditation number
No ☐

**Note:** You will need to have a Driver Authorisation if you intend to drive the vehicle.

Signature

Date

 /  / 

If there are more than two people, attach details on a separate sheet.

Continued over page...

**7 Complete for sub-lease and other notification****Notification type**

**Period of agreement**
 /  /  to  /  / 
**Agreement is with**Corporation ☐ Business ☐ Partnership ☐Individual ☐

Corporation name (if applicable)

Australian Company Number (ACN):

**Note:** Evidence of corporation name (for example, Certificate of Incorporation including a certified copy of the list of current directors (available from the Australian Securities and Investments Commission) must be attached.

Does the company currently hold Operator Accreditation?

Yes ☐ Operator Accreditation number
No ☐

Business name ('trading as') (if applicable)

Australian Business Number (ABN):

State:

Address

Postal address (if same as above, write 'as above')

Day time telephone number

Fax number (if applicable)

**Licence owner to complete section below**

Licence owner's name

Operator Accreditation number

Signature

Date

 /  / 
**Personal details**

To be completed and signed by individual, partnerships, or corporate directors.

**First person's details**

Family name

Male ☐Female ☐

Given name/s

Date of birth

 /  / 

Place of birth

Residential address

Postcode

Postal address (if same as residential, write 'as above')

Postcode

Telephone (private)

Telephone (business)

**Do you currently hold Operator Accreditation?**Yes ☐ Operator Accreditation number
No ☐

**Note:** You will need to have a Driver Authorisation if you intend to drive the vehicle.

Signature

Date

 /  / 
**Second person's details – if applicable**

Family name

Male ☐Female ☐

Given name/s

Date of birth

 /  / 

Place of birth

Residential address

Postcode

Telephone (private)

Telephone (business)

**Do you currently hold Operator Accreditation?**Yes ☐ Operator Accreditation number
No ☐

**Note:** You will need to have a Driver Authorisation if you intend to drive the vehicle.

Signature

Date

 /  / 

**If there are more than two people, attach details on a separate sheet.**

Continued over page...

**Taxi/Limousine Service Licence Transfer/Lease/Management Notification continued (page 6 of 6)...**

The declaration below must be signed by all persons whose names appear on this application in the presence of a Department of Transport and Main Roads authorised officer or police officer (if there is no local departmental customer service centre or TransLink office).

**9 Applicant's declaration**


I authorise the Department of Transport and Main Roads to use this information to maintain a database which is used to prepare correspondence, monitor transactions and to provide relevant government agencies with information relating to my Taxi/Limousine Service Licence details.

A person shall in this document not:

- wilfully make or authorise the making of a statement that is misleading in a material particular
- wilfully omit or authorise the omission of any matter or thing without which the application is misleading in a material respect.

If you do not tell the truth in your application you may be prosecuted under the relevant Acts or Regulations.

**I state that the information provided in this application is complete, true and correct in every detail.**

Name	Signature	Date	Office use only  *Customer number
		/ /	
		/ /	
		/ /	
		/ /	
		/ /	
		/ /	
		/ /	

**Witnessing officer's use**

**Note:** You must sight the signatory's current driver's licence, or other acceptable proof of identity.

City or town where signed

Name

Witness' signature

Date

Finance questions verified:

Seller: Yes ☐ No ☐

A licence will not be transferred unless advice from financial institution, if necessary, is received.

Purchaser: Yes ☐ No ☐

Advice from the financial institution must be received if the purchaser is obtaining finance to purchase this licence.

Licence document received?

Yes ☐ No ☐

I have sighted the stamped instrument evidencing the transfer of the licence. A copy has been made for attachment and the original has been returned to the applicant (this is mandatory).

Yes ☐

I hereby certify that I have attached and sighted all documentation.

Witness' signature

Date

**Approving officer's use only**

**\* Write in the Customer number for all applicants above** 

Recommended by

Date

Approved by

Date

**Privacy Statement:** The Department of Transport and Main Roads is collecting the information on this form for the purpose of amending your Taxi/Limousine Service Licence details. This information is placed on the department's Service Industry Licensing Accreditation System database which is used for the generation of renewal notices, correspondence and the monitoring of licensing accreditation. Some of this information is usually disclosed to various government agencies including the Queensland Police Service and interstate licensing authorities. The collection of this information is in accordance with the *Transport Operations (Road Use Management) Act 1995* and the *Transport Operations (Passenger Transport) Act 1994*. The Department of Transport and Main Roads will not disclose your personal details to any other third party without your consent unless authorised or required by law.