

INFORMATION FOR MUTUAL RECOGNITION APPLICANTS

This cover sheet has been provided to assist you when completing a Mutual Recognition Notification and Declaration. Please remove this page when submitting your application.

WHO IS ELIGIBLE?

You may apply for accreditation as a commercial passenger vehicle driver (including commercial bus) or for a driving instructor authority in Victoria if you hold a current and valid equivalent authority in another Australian State/Territory or New Zealand.

Australian applicants registered to practice an occupation in another State/Territory are entitled to be registered in Victoria for the equivalent occupation under the *Mutual Recognition Act 1992* (Cth).

New Zealand applicants registered to practice an occupation in New Zealand are entitled to practice a similar occupation in Australia under the Trans-Tasman Mutual Recognition Arrangements (TTMRA).

WHO IS NOT ELIGIBLE?

You will not be eligible for mutual recognition if your driver licence in your original State/Territory or New Zealand is no longer current.

If you have transferred your driver licence to Victoria, then you should apply for accreditation or authority as a new applicant. Visit our website for further information.

To be registered in Victoria for the equivalent occupation you must notify Commercial Passenger Vehicles Victoria (CPVV) by completing the attached Notification form and Declaration.

DOCUMENTATION AND PROOF OF IDENTITY (POI) REQUIREMENTS

You must provide the following documents with this application form

- A completed Notification and Declaration form.
- A copy of your current authority to drive commercial passenger vehicles or to provide commercial driving instructor services in Australia or New Zealand.
- A copy of your current Driver Licence, if separate to your commercial or driving instructor authority.
- NSW T Condition Only:** If you have not held a driver accreditation in Victoria in the last 6 months, a letter from your current Booking Service Provider confirming your suitability **OR** a National Police History Check dated not more than 3 months ago.
- Driving instructor only:** Two (2) passport sized photos.
- Application Fee Payment (CPVV does not accept cash - visit our website for current fees and payment methods).

LODGEMENT DETAILS

Post GPO Box 1716, Melbourne, 3001
Faxed or emailed applications will not be accepted.

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DEEMED ACCREDITATION

Once this form has been accepted by CPVV and you receive confirmation of deemed accreditation, you can begin providing a commercial passenger vehicle service or provide driving instructor services in Victoria (whichever is relevant) while CPVV makes its decision about your accreditation or authority.

You will be notified in writing once you have been granted deemed authority. You must abide by all conditions shown on the letter.

If CPVV require further information you will be contacted in writing.

CPVV PUBLIC REGISTER

Once your accreditation or authority is granted, your name and accreditation or authority details will be published on the public register of industry participants available on the CPVV website.

AUTHORISED WITNESS

You are required to make a statutory declaration on Page 4 in front of an authorised witness.

If you are completing this form in Victoria:

A full list of authorised witnesses is available on the Victorian State Government website:

<https://www.justice.vic.gov.au/statdecs>

If you are completing this form in another state/territory:

More information is available on the Attorney-General's Department website:

<https://www.ag.gov.au/Publications/Statutory-declarations/Pages/default.aspx>

If you are completing this form in New Zealand:

More information is available on the New Zealand Government website:

<https://www.govt.nz/browse/law-crime-and-justice/making-a-statutory-declaration/>

Incomplete applications

If you fail to provide or complete any relevant part of this form, it will not be assessed and will be returned to you as incomplete. You will be required to complete and or provide the missing information requested before re-submitting the whole form.

NOTIFICATION AND DECLARATION FOR MUTUAL RECOGNITION

Please complete all fields in BLOCK LETTERS

Surname:

First Name/s
(including middle names)

Date of Birth:

Gender:

Male

Female

Unspecified

Place of Birth:

Country of Birth:

Home Phone:

Mobile Phone:

Email Address:

Current Residential Address:

Street:

Suburb:

State:

Postcode:

Postal Address: (if different form above)

Street:

Suburb:

State:

Postcode:

Which occupation(s) are you seeking recognition for?: (tick all that apply)

Commercial Passenger Vehicle Driver

Bus Driver

Driving Instructor

Which State(s)/Territory or New Zealand do you hold current authority in?: (tick all that apply)

Australian Capital Territory

Northern Territory

South Australia

Western Australia

New South Wales

Queensland

Tasmania

New Zealand

Accreditation or Authority number:

Expiry date:

Copy of accreditation attached?

Yes

No

Do you hold a current Victorian driver's licence?

Yes

No

Please note if you hold a Victorian Driver Licence your application for mutual recognition cannot be accepted and you will need to apply as a new applicant see further cpv.vic.gov.au

In which State/Territory or New Zealand do you hold a current and valid motor vehicle licence?

(Please include licence type and number)

NOTIFICATION AND DECLARATION FOR MUTUAL RECOGNITION

If you answer 'Yes' to any of the below questions, please provide details on a separate sheet of paper

1. Have you previously held or applied for driver accreditation (including commercial bus) or driving instructor authority in Victoria?

No Yes

If yes, provide details

2. Are you the subject of disciplinary proceedings in any State/Territory or New Zealand (including preliminary investigations or actions that may lead to disciplinary proceedings) in relation to the occupation(s) for which you are seeking mutual recognition?

No Yes

If yes, provide details

3. Is your registration in any State/Territory or New Zealand for the occupation(s) for which you are seeking mutual recognition currently cancelled or suspended as a result of disciplinary action?

No Yes

If yes, provide details

4. Are you personally prohibited from being a commercial passenger vehicle driver (including bus) or driving instructor in any State/Territory or New Zealand?

No Yes

If yes, provide details

5. Are you subject to any action (including criminal charges, civil or disciplinary action) in any State/Territory or New Zealand that might lead to disciplinary proceedings in relation to your driver accreditation or driving instructor authority?

No Yes

If yes, provide details

6. Are you subjected to any special conditions in being a commercial passenger vehicle driver (including bus) and or driving instructor in each State/Territory or New Zealand as specified above? (including any conditions relating to medical concerns, vehicle types etc)

No Yes

If yes, provide details

7. Are you, or have you ever been subject to any reporting obligations under any Sex Offender legislation in any State/Territory or New Zealand?

No Yes

If yes, provide details

8. Are you currently the subject of any traffic offences in any State/Territory of Australia or New Zealand where the charge has not yet been determined?

No Yes

If yes, provide details

9. Are you currently the subject of any criminal offences in any State/Territory of Australia or New Zealand where the charge has not yet been determined?

No Yes

If yes, provide details

DECLARATION, CONSENT AND PRIVACY INFORMATION

I,
(Surname)

OF
(Address)

(First name/s)

1. declare that the contents of this Notification and Declaration are true and correct and I make it knowing that making a statutory declaration that I know to be untrue is an offence;

CONSENT AND DECLARATION – APPLICATION FOR ACCREDITATION

2. certify that I am applying to be registered as a commercial passenger vehicle driver and/or driving instructor in Victoria pursuant to the mutual recognition principles;
3. consent to the making of inquiries of, and the exchange of information with authorities in Australia and New Zealand regarding my registration as a commercial passenger vehicle driver or driving instructor within Australia and New Zealand and otherwise regarding matters relevant to this Notification and Declaration and then information contained within;
4. certify that this Notification and Declaration is accompanied by document(s) that are either the original or a complete and accurate copy of the instrument it is purporting to be.
5. I have read and understood this notice and the CPVV Privacy Policy cpv.vic.gov.au/about-us/privacy-policies. I consent to CPVV collecting, storing, retaining, using and disclosing all information obtained from or about me from other government agencies, organisations or persons, for the purposes of dealing with this application, my driver accreditation and/or my booking service provider registration under the Act or as otherwise authorised by law.
6. I declare that the information provided in this application form is, to the best of my knowledge, true, correct and complete. I understand that providing false or misleading information is a serious offence under the Act.
7. I consent to the ongoing checking by CPVV of any of my records held by government agencies, organisations or persons, that are relevant to my suitability or fitness to hold my accreditation and/or my registration and the release of information recorded against my name.
8. I consent to CPVV disclosing:
 - the status of my accreditation and/or my registration, including that it has expired, on the CPVV public register;
 - my name and address if CPVV is satisfied that I was a driver of a motor vehicle, that has been involved in a traffic accident resulting in injury to a person or damage or destruction of any property and I failed to provide my name and address as required in section 61 of the *Road Safety Act 1986 (Vic)*;
 - my medical information to an independent health professional or review panel for the purposes of assessing whether I am sufficiently fit and healthy to hold driver accreditation and for such medical professional or review panel to provide their written findings to CPVV;
 - the status of my application for accreditation and/or registration, or the current validity of my accreditation and/or registration and details of any disciplinary action, restrictions or conditions to which my accreditation and/or registration is subject, to booking service providers with whom I may be affiliated or owners of vehicles I am permitted to drive;
 - disclose to any person who has made a complaint against me as an accredited driver, the action taken by CPVV in response to any such substantiated complaint.
9. CPVV has contractual arrangements with the Attorney General's Department (AGD) to collect personal information on its behalf in order to utilise the electronic national document verification service for an individual who is seeking accreditation under the *Commercial Passenger Vehicle Industry Act 2017 (Act)* and related regulations.
10. CPVV will use the results of the Document Verification Service (DVS) to determine the validity of your application for accreditation. AGD will access the records of the relevant issuing body or official record holder of the documentation that you have submitted in your application for accreditation. AGD will confirm the integrity of the information by checking with the relevant issuing body or official record holder.
11. I consent to CPVV disclosing information to AGD for the purposes of the DVS and the identifying information contained on evidence of identity documents to be matched by the relevant issuing body or official record holder.
12. I understand that as an accredited organisation with the Australian Criminal Intelligence Commission (ACIC), CPVV may collect personal information in order to submit a National Police History Check (NPHC) for an individual seeking driver accreditation under the Act and associated regulations.
13. I understand that as part of the NPHC, ACIC and other police agencies may access their records to obtain and disclose police history information relating to me.
14. I consent to CPVV or other police agencies disclosing and receiving information about me from ACIC or any other Government department, agency or entity, as the case may require for the purposes of conducting a NPHC and other general law enforcement functions.
15. I declare that I seek to be accredited as commercial passenger vehicle driver in Victoria and that my work as a commercial passenger vehicle driver may involve contact with children and vulnerable groups.
16. I understand that if for any reason I do not agree with the results of the NPHC, I may notify CPVV's Privacy Officer (by writing to privacy@cpv.vic.gov.au or GPO Box 1716 Melbourne VIC 3001) at first instance.
17. I understand that for any other questions, I can contact ACIC's Privacy Officer on (02) 6268 7000 or (by writing to privacy@acic.gov.au or GPO Box 1573 Canberra City ACT 2601).

I have read and understood the information contained in this notice.

DECLARATION, CONSENT AND PRIVACY INFORMATION

Declared by me: _____
(name of person making this declaration)

at: _____
(address where this declaration was made)

this _____ day of _____ 20____ _____
Signature of person making this declaration

I am an authorised statutory declaration witness and I sign this document in the presence of the person making the declaration at the time of them making this declaration.

Name: _____ Title: _____

Signature of person authorised under section 30(2) of the Oaths and Affirmations Act 2018 to witness the signing of a statutory declaration

ADDITIONAL INFORMATION