



Government of South Australia

Department for Infrastructure  
and Transport

www.sa.gov.au

ABN 92 366 288 135

Telephone Enquiries : 13 10 84

Service SA : GPO Box 1533, Adelaide SA 5001

**REGISTERED OWNER /OPERATOR**

PETER TIMOTHY JOLLEY

PO BOX 779

MACCLESFIELD SA 5153

**REGISTRATION DETAILS CERTIFICATE****REGISTRATION DETAILS CERTIFICATE DOES NOT PROVE OWNERSHIP**

The Registration Details Certificate must be retained for change of registered ownership

For information about the CTP Scheme, visit the CTP Regulator website at www.ctp.sa.gov.au

|                        |                     |                     |                    |                       |                |
|------------------------|---------------------|---------------------|--------------------|-----------------------|----------------|
| <b>Client Number :</b> | <b>CE5182</b>       | <b>Plate Type :</b> | <b>A ALPHA-NUM</b> | <b>Plate Number :</b> | <b>S875ASN</b> |
| Commencement Date      | : 23/09/21          | Expiry Date         | : 22/09/22         | Colour                | : WHITE        |
| Vehicle Make           | : TOYOTA            |                     |                    | Year of Manufacture   | : 2006         |
| Body Type              | : SEDAN             |                     |                    | No. of Cyl            | : 4            |
| VIN/Chassis Number     | : 6T153BK360X101375 |                     |                    | Engine Number         | : 2AZA302348   |
| CTP Insurer / Premium  | : QBE / 51          |                     |                    |                       |                |
| Class                  |                     |                     |                    |                       |                |

The onus is on you to renew registration on expiry and ensure the vehicle meets safety standards. You must notify change of address within 14 days.

**APPLICATION FOR TRANSFER OF REGISTRATION - MUST BE LODGED WITHIN 14 DAYS****BOTH PARTIES MUST SIGN THIS FORM****Audit Number**

18563496542

The new owner must transfer registration to their name within 14 days of purchase and pay transfer and stamp duty fees by using their mySA Gov account (create one at sa.gov.au/ezyreg), in person at a Service SA Centre or by posting to Service SA, GPO Box 1533 Adelaide SA 5001. Failure to transfer registration within 14 days may result in a late payment fee.

New owners need to check the registration expiry date, visit ezyreg.sa.gov.au. If the vehicle is to be registered in joint names, one person will be recorded as the Registered Operator.

- The appropriate transfer fee and stamp duty must be presented with this form (**phone 13 10 84 to find out the total fee payable**).
- Proof of identity and address may be required.
- Penalties are prescribed for under declaration of the vehicle value or false statements.
- If the vehicle is to be registered in joint names, one person will be recorded as the Registered Operator.
- You must be 18 years of age to apply for a Transfer of Registration of a Heavy Vehicle (GVM >4.5 tonnes) or 16 years of age for any other vehicle.

|  |  |                |  |   |
|--|--|----------------|--|---|
| New Owner's Name   | Surname / Body Corporate Name  | Given Names    | Client / Licence Number                                  | Date of Birth<br>/ /  |
| Other/Joint Owner's Name   |  |                | Client / Licence Number                                  | Date of Birth<br>/ /  |
| Residential (Home) Or Business Address   | Number and Street  | Suburb or Town | Postcode   |   |
| Postal Address<br>(if different to above address)  |  | Suburb or Town | Postcode   |   |
| Garaging Address<br>In South Australia<br>(if different to residential)  | Number and Street  | Suburb or Town | Postcode   |   |
| Value of Vehicle for Stamp Duty<br>The market value or actual purchase price (whichever is greater) at the date of completing this form must be stated. I/We declare that the value of the vehicle is: |  |                | \$   |   |
| Input Tax Credit (ITC)<br>Will the vehicle be used for any purpose that entitles you to any input tax credit (ITC) for the GST included in your CTP premium?   |  |                | Yes <input type="checkbox"/> No <input type="checkbox"/> |   |
| Motor Vehicle Dealer Declaration<br>I declare that this application is made to enable resale or demonstration of this vehicle. I hold a second hand motor vehicle dealer's Licence Number:             |  |                |  |   |
| Signatures   | I have purchased the vehicle from the registered owner shown above and I am applying to transfer the registration. |                | Date Vehicle Purchased<br>/ /                            | I have disposed of the vehicle to the new owner shown above and I authorise the transfer of registration. |
|  | Signed _____   |                |  | Signed _____  |

**DISPOSAL NOTICE - MUST BE LODGED WITHIN 14 DAYS****BOTH PARTIES MUST SIGN THIS FORM**

The seller must submit this disposal notice within 14 days of sale. This can be done by using a mySAGOV account (create one at sa.gov.au/ezyreg), in person at a Service SA Centre or by posting to Service SA, GPO Box 1533 Adelaide SA 5001.

It is in the seller's best interest to provide as much detail as possible about the buyer, including a SA client/driver's licence number where possible.

|                       |                    |                                   |                               |
|-----------------------|--------------------|-----------------------------------|-------------------------------|
| <b>Plate Type :</b>   | <b>A ALPHA-NUM</b> | <b>REGISTERED OWNER /OPERATOR</b> | <b>Client Number : CE5182</b> |
| <b>Plate Number :</b> | <b>S875ASN</b>     | <b>PETER TIMOTHY JOLLEY</b>       |                               |
| <b>Vehicle Make :</b> | <b>TOYOTA</b>      | <b>PO BOX 779</b>                 |                               |
| <b>Body Type :</b>    | <b>SEDAN</b>       | <b>MACCLESFIELD SA 5153</b>       |                               |

|  |                               |                        |                         |                               |                     |
|--|-------------------------------|------------------------|-------------------------|-------------------------------|---------------------|
| The above vehicle was sold to the following person(s) on |                               |                        | Date of Sale<br>/ /     | Time of Disposal<br>: am / pm | Selling Price<br>\$ |
| New Owner's Name   | Surname / Body Corporate Name | Given Names            | Client / Licence Number | Date of Birth<br>/ /          |                     |
| Other/Joint Owner's Name                                 |                               |                        | Client / Licence Number | Date of Birth<br>/ /          |                     |
| Residential (Home) Or Business Address                   | Number and Street             | Suburb or Town         | Postcode                |                               |                     |
| Postal Address<br>(if different to above address)        |                               | Suburb or Town         | Postcode                |                               |                     |
| Signature of Registered Owner/Operator                   |                               | Signature of New Owner |                         | Date<br>/ /                   |                     |