



Privacy notice

Your personal information is protected by law, including the *Privacy Act 1988*. Your personal information may be collected by the Department of Veterans' Affairs (DVA) for the delivery of government programs for war veterans, members of the Australian Defence Force, members of the Australian Federal Police and their dependants.

[Read more: How DVA manages personal information.](#)

To be completed by the MVCS client or the appointed service provider

PART A	Client details
1. Surname	<input type="text"/>
2. Given name(s)	<input type="text"/>
3. Date of birth	<input type="text" value="/ /"/>
4. DVA file number (if applicable)	<input type="text"/>
5. Residential address	<input type="text"/> <input type="text" value="POSTCODE"/>
6. Postal address (if same as residential, write 'AS ABOVE')	<input type="text"/> <input type="text" value="POSTCODE"/>
7. Telephone number	Home <input type="text" value="[]"/> Work <input type="text" value="[]"/> Mobile <input type="text"/>
8. E-mail address	<input type="text"/>
PART B	MVCS Vehicle details
9. Make, Model and colour of the MVCS vehicle	<input type="text"/> <input type="text"/>
10. Engine number	<input type="text"/>
11. Vehicle Identification Number (VIN) or Chassis Number	<input type="text"/>
12. Registration number	<input type="text"/>
13. Usual garaging address of MVCS vehicle (if same as Part A, write 'AS ABOVE')	<input type="text"/> <input type="text" value="POSTCODE"/>

For assistance phone DVA on **1800 555 254** (freecall).
Please write in block letters using a blue or black pen (not pencil).

PART C**Acknowledgement of receipt**

I acknowledge receipt of the MVCS vehicle as described above and have attached certified copies of the following documents:

- the current Motor Vehicle Registration Certificate;
- the Compulsory Third Party and Comprehensive Insurance Policies for the MVCS vehicle.

Signature

Date

OR I acknowledge receipt of the MVCS vehicle, with modifications as described above and have attached certified copies of the following documents:

- the current Motor Vehicle Registration Certificate;
- the Compulsory Third Party and Comprehensive Insurance Policies for the MVCS vehicle; and
- warranty and/or insurance documents pertaining to any MVCS modifications fitted to the vehicle.

Signature

Date

Post the completed form to: **Department of Veterans' Affairs**
GPO Box 9998
Brisbane QLD 4001