

Application for Assessment of a Unique/Historic Vehicle

(CONCESSION CODE 404)

VEHICLE OWNER DETAILS							
VEHICLE OWNER NAME		CONTACT PERSON (If applicable)					
STREET ADDRESS			POSTCODE				
POSTAL ADDRESS (IF SAME AS STREET ADDRESS WRITE "AS ABOVE")						POSTCODE	
TELEPHONE NUMBER	FAX NUMBER		EMAIL				
VEHICLE DETAILS							
PLATE NUMBER (IF LICENSED)		YEAR M	IAKE		MODE		
FLATE NOWBER (IF LICENSED)	TEAR		_		MODEL		
BODY TYPE		COLOUR 1	COLOUR 2	COLOUR 2 S		TEERING ORIENTATION	
					l□ ∟	HD	
					∐ F	RHD	
ENGINE NUMBER			VIN NUMBER				
VELUCI E CATECORY							
VEHICLE CATEGORY							
UNIQUE VEHICLE - A vehicle of limited production or limited availability in Australia, or a vehicle which is sufficiently unusual to warrant collection.							
HISTORICAL VEHICLE - A vehicle which has some historical significance in that it, or similar examples, are recognised as being part of motoring history (locally or otherwise), or a vehicle which is an early (low production number) or last (end of production) example of a particular make or model.							
ADDITIONAL INFORMATION							
The following additional information must be provided with this application:							
 Written evidence regarding the history of the marque and of the particular vehicle described above. 							
 A colour photograph, three quarter front view of the vehicle described above. Minimum size 125mm x 85mm. 							
CMC OFFICE USE ONLY							
Please tick the appropriate box(es) to indicate that copies of the documentation are attached to this application and that the vehicle has been physically sighted by a CMC technical committee officer.							
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☐ WRITTEN EVIDENCE ☐ VEHICLE HAS BEEN SIGHTED ☐ COLOUR PHOTOGRAPH							
☐ Approved ☐ More Information	on 🗌 Not Ap	oproved					
Club Details			Club Membersh	ip Number			
CMC Technical Committee Office	r		Signature				
Site			Date				