



## OWNER'S DECLARATION

I declare that:

- I consent to my vessel's records being released to the accredited marine surveyor/agent/representative named in this form for the purposes of my above mentioned vessel.
- To the best of my knowledge the information provided by me in this is true and correct.
- I consent to Roads and Maritime Services making all reasonable enquiries in order to verify that the information provided by me in this application and any attachment I have included with this application is true and correct.
- I understand and acknowledge that Roads and Maritime Services may ask me or another person to provide any information or document that Roads and Maritime Services reasonably considers necessary for consideration of this application.
- I understand and acknowledge that the Roads and Maritime Services is collecting my personal information for the purposes of this Information Release only, and that the information on this form will not be used other than as permitted by law.

Name:

Signature:

Date:

day / month / year

## PLEASE SUBMIT COMPLETED FORM TO:

**Mail:** Roads and Maritime Services  
DCV Safety Unit  
Locked Bag 5100  
Camperdown NSW 1450

**Email:** [records@rms.nsw.gov.au](mailto:records@rms.nsw.gov.au)