

# Application For Road Permit (Road Contract Licence) Transfer/Re-Issue/Amendment

Land Transport Act 1998 [Section 65 (2) (b)]



**Purpose:** Road Contract License authorizing the conduct of one or more road services for the transportation of passengers and goods on the basis of a contract, either express or implied, between the holder of the license and another person.

**Note:** The license is issued for a specific group of people who are pre-arranged.

**Types of Vehicle:** An omnibus must be certified by a Certifying Officer equipped for the conveyance of not less than 16 persons excluding the driver and constructed so that the driver and passengers are located in the same structural compartment.

## REQUIREMENTS TO BE PROVIDED BY THE APPLICANT

- [i] Duly completed application forms in duplicate. A statement relating to the business or proposed business of the applicant should be clearly stated in the forms, together with the number of vehicles to be operated and the intentions in regard to motor vehicle purchase and replacement.
- [ii] The applicant's financial stability and a letter from a bank or from any reputable lending institution or a current bank statement Finance for a deposit for at least two omnibuses to be shown.
- [iii] Details of any business or association with any other permit issued by the Authority and details of sharing of facilities with any other permit holder.
- [iv] In case of the applicant being a limited liability company - Company Registration Certificate and Memorandum and Article of Association to be provided and application form stamped with common seal of the company and signed by at least two Directors of the company.
- [v] Two recent identical passport size photographs of the applicant [or the Manager in the case of a company].
- [vi] Immigration status.
- [vii] A binding contract to include-
  - a group of persons to be transported
  - specific places of transportation
  - prior payment arrangements with amounts
  - validity of the contract
  - or
  - courtesy transportation by the permit holder for its pre-booked clients and staff.
- [viii] The Applicant to confirm :
  - [a] The suitability of the routes on which service would be provided under the permit.
  - [b] The suitability of the vehicle to be used.
  - [c] His /Her suitability to hold a permit.[Applicant please note that Police vetting reports are to be produced before application fees are paid at LTA.]
  - [d] That the proposed service does not negatively affect other public service operators, also it will not offer unfair and wasteful competition with alternative forms of transport operating in the same sphere.

**SECTION A**

**File No:**

**1. APPLICANTS NAME**

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Surname	Middle Name	First Name
Fathers Name	Driver Licence No:	

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**2. ADDRESS**

Business	Residential
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Phone No/e-mail

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Business	Occupation
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**3. DATE OF BIRTH**

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attach original copies of birth certificate

**4. MARITAL STATUS**

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**5. NUMBER OF DEPENDENTS**

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NAME AND AGE

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**6. RESIDENTIAL STATUS**

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**7. FIJI CITIZEN** YES / NO (circle where applicable)

**8. REFEREES AND ADDRESSES**

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Personal

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Professional

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**9. NEXT OF KIN** (name/relationship/phone contact/address)

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**SECTION B**

**1. BANK DETAILS**

Bank \_\_\_\_\_

Branch \_\_\_\_\_

Account Number \_\_\_\_\_

Account Style \_\_\_\_\_

**Note**

- (a) Certified true copy of Passbook or last three months bank statements is to be attached together with the application form.
- (b) Financial Stability letter from a Bank or from a reputable lending institution to be attached.

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**1. STATEMENT OF POSITION (to be attached)**

For self employed or salaried applicant, a list of personal assets and liabilities that a applicant has on the date of application is to be provided.

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**2. Financial Statement and Memorandum and Article of Association for limited liability company to be attached with application.**

**SECTION C**

**PARTICULARS OF VEHICLE**

Do you own any vehicle [s] YES or NO

If yes give vehicle registration number \_\_\_\_\_

How many are currently used as PSV? \_\_\_\_\_

Are you going to use one of the above vehicles? YES or NO

- Please note that the vehicle to be used for this permit should be currently registered as **PRIVATE**.

**PARTICULARS OF VEHICLE TO BE USED ON THIS PERMIT**

Registration Number \_\_\_\_\_

Make \_\_\_\_\_

Model \_\_\_\_\_

Year of Manufacture \_\_\_\_\_

Engine Number: \_\_\_\_\_

Engine Capacity: \_\_\_\_\_

Body Type \_\_\_\_\_

Fuel Type \_\_\_\_\_

Transmission Type \_\_\_\_\_

Air Conditioning Unit \_\_\_\_\_

**Please ensure that all instructions given above is true and correct. You application will be refused if information is incorrect.**

SECTION C (cont)

3. BRIEF OF CONTRACT.

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4. Details of all current permits / license approved from LTA in applicants name.

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5. POLICE REPORT( to be attached)

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6. MEDICAL REPORT (to be attached)

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7. JUSTIFICATION FOR THE CONTRACT.

**Note:** Quarterly reports of records to be submitted to the Authority in line with Public Service Vehicle Regulation 15: 1-6.

8. IMPORTANT

A decision may be given solely on the information provided in this application and attachments and the applicant is advised that in his/her own interest he/she should provide all available information in support of this application.

**DECLARATION**

1, \_\_\_\_\_ f/n \_\_\_\_\_  
whose signature appears below declare that the particulars given in this application and in the attachments are true and correct.

Dated this \_\_\_\_\_ of \_\_\_\_\_ 20 \_\_\_\_\_

Signature: \_\_\_\_\_  
[Applicant/Manager/Director and Common seal in the case of Limited Liability Company]

Note: [a] The application form must be completed and must be accompanied by the fees of \$ \_\_\_\_\_

**SECTION D (For office use only)**

1. Check list completed yes / no  
Remarks \_\_\_\_\_  
\_\_\_\_\_

2. Interview yes / no  
Remarks \_\_\_\_\_  
\_\_\_\_\_

3. Fees Paid yes / no  
Receipt Number: \_\_\_\_\_ Date: \_\_\_\_\_ Amount \$: \_\_\_\_\_

4. Recommendation by authorized Customer Service Officer  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of CSO: \_\_\_\_\_ District: \_\_\_\_\_

Recommendation by Supervisor PSV  
\_\_\_\_\_  
\_\_\_\_\_

Name of PSV: \_\_\_\_\_ Date: \_\_\_\_\_

5. Advertisement information  
Name of daily \_\_\_\_\_ Date of Advertisement \_\_\_\_\_

6. APPROVAL AUTHORITY ( \_\_\_\_\_ )  
\_\_\_\_\_  
\_\_\_\_\_

Note – Reasons for approval or refusal to be specified.