

# Vehicle inspector application

## Warrant of fitness – light motor vehicles

IO ENDORSED

This form is used when applying to become an NZ Transport Agency vehicle inspector for the issuing of warrants of fitness (WoF).

Before completing this form you should read the WoF vehicle inspector important information on our website at <http://vehicleinspection.nzta.govt.nz/applications/vi-applications>, or you can request a copy by calling us on 0800 699 000.

**Note 1:** applicants for appointment as a WoF vehicle inspector must be endorsed by an inspecting organisation (IO) prior to making their application.

**Note 2:** applicants must have a current driver licence for the class(es) of vehicle(s) to be inspected.

### Inspection groups

Please tick the boxes to indicate which inspection groups you wish to apply for.

- Motorcycles
- Light trailers
- Light motor vehicles

### Applicant details

Complete all areas.

Applicants must have a current driver licence for the classes of vehicles to be inspected.

Surname

First name(s)

Date of birth

Driver licence no.

Home address

  

Contact phone number

Work phone number

Email address (acknowledgement of your application will be emailed)

Have you been appointed as an NZ Transport Agency vehicle inspector before?

Yes  No

If 'yes', what was your authority number?

Have you ever been convicted of a criminal or driving offence(s) in New Zealand or overseas (including infringements, vehicle impoundment or roadside suspensions but not including parking infringements)?

Yes  No

## Applicant qualifications and skills

Please tick the boxes to indicate that you meet the requirements.

You must:

- be qualified as an automotive technician with either NZ Trade Certificate in Automotive Engineering, National A-Grade Registration, NZ Advanced Trade Certificate, or equivalent, **OR**
- be qualified as an automotive technician in Automotive Engineering with either National Certificate in Automotive Engineering (Level 4 or higher), National Registration, or equivalent, and references of three years continuous relevant work experience, **OR**
- be a person who has worked in full-time employment carrying out repairs and maintenance to the safety aspects of motor vehicles for at least five cumulative full-time years.

## Inspecting organisation details

Complete all areas.

To become a vehicle inspector, an applicant must have access to an IO where the practical testing will be conducted.

IO name

IO authority number

Site address

  
  

Phone number

Fax number

Postal address

  
  

Email address

## Testing site details

Fill in this section **only if** the final practical assessment site location where the applicant is to be assessed by the Transport Agency is different from 'Inspecting organisation details' above (eg if you have engaged the services of a training provider).

IO name

IO authority number

Site address

  
  

Phone number

Fax number

Postal address

  
  

Email address

## Inspecting organisation declaration

To be completed by inspecting organisation (please tick).

- I confirm that this applicant meets the criteria found in the *Vehicle inspection requirements manual: In-service certification*, Introduction, section 6 Appointments.
- I confirm that this applicant is suitably trained.
- I confirm that this applicant is suitably qualified and experienced.
- I confirm that this applicant has read and understood the *NZ Transport Agency vehicle inspector code of conduct*.

IO representative's name

Date

IO representative's position

IO representative's signature

## Applicant declaration

I declare that the information supplied in this application is correct and that if approved I will comply with the Rules and Regulations regarding this application. I authorise the NZ Transport Agency to make all enquiries as to my character and suitability to be a vehicle inspector for the purposes of this application and for the term of any appointment as a vehicle inspector (under the *Official Information Act 1982* and the *Privacy Act 1993*).

I have read and understood the *NZ Transport Agency vehicle inspector code of conduct*.

Signature

Date

## Address to send application

### Send completed applications to:

Licensing Assessments – Vehicle Inspectors  
NZ Transport Agency  
Private Bag 11777  
Palmerston North 4442

**OR** scan and email to [inspectors@nzta.govt.nz](mailto:inspectors@nzta.govt.nz)

## Payment details

The fee for this application is \$494.50.

Please complete one of the payment options listed below.

### OPTION 1

Enclose the application fee with this application. Please make your cheque payable to the NZ Transport Agency and note on the back the following information:

1. WOFCER
2. **Code:** 80000725
3. **Reference:** the last six digits of your driver licence number

### OPTION 2

Call us on 0800 699 000 with your credit card or debit card to pay over the phone. We will give you a reference number - please enter that number here:

Reference number

**Please note:** the Transport Agency accepts Visa, MasterCard and Debit Visa/MasterCard.