



Application for a MotorSport left-hand drive exemption

Mail to: NZ Transport Agency, Vehicles Unit, Private Bag 6995, Wellington 6141

Fax to: 04 894 5011

Email to: exemptions@nzta.govt.nz

Applicant details

Company (trading name): _____

Applicant name: _____

Postal address: _____

Phone (daytime): _____ Mobile : _____

Fax : _____ Email: _____

MotorSport New Zealand licence number: _____ Licence expiry date: _____

Vehicle details

Make: _____ Year of manufacture: _____

Model: _____ Model code: _____

VIN/chassis

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Required documentation

Photocopy of Low Volume Vehicle MotorSport Authority Card

NZ Transport Authority's discretion to grant exemptions

The information contained in this application does not limit the NZ Transport Agency's authority to reject or accept an application, taking into account any conditions or matters related to the application, and satisfaction that there is no significant increase in risk to safety posed by the exemption requested.

Note This application (for the above vehicle) has been approved by MotorSport NZ as being compliant with the eligibility criteria and exemption conditions as agreed to by the NZ Transport Agency and MotorSport New Zealand.

Applicant signature: _____ Date : _____

Signature on behalf of the
MotorSport NZ technical department: _____ Date: _____