



# Change of Personal Details

The information you supply on this form may be disclosed to other government agencies where provided for in legislation. The Director General of the Department of Transport also releases aggregated statistical information to third parties. However, your personal identifying information will not be released to these persons without your explicit consent.

**ORGANISATION CODE (if applicable)**

--	--	--	--	--	--

**Postal Address:**

Department of Transport  
GPO Box R1290  
PERTH WA 6844

**New Details (certified documentary evidence supporting change of name must be provided)**

SURNAME/COMPANY NAME		GENDER Male <input type="checkbox"/> Female <input type="checkbox"/>	
OTHER NAMES IN FULL		DATE OF BIRTH	
RESIDENTIAL ADDRESS (DETAILS COMPULSORY)			
SUBURB OR TOWN		POST CODE	
POSTAL ADDRESS (IF SAME AS ABOVE LEAVE BLANK)			
SUBURB OR TOWN		POST CODE	
CONTACT TELEPHONE NUMBER		EMAIL ADDRESS	

**Previous Details (to be completed where name/DOB has changed or requires correcting)**

SURNAME/COMPANY NAME			
OTHER NAMES IN FULL		DATE OF BIRTH	
RESIDENTIAL ADDRESS			
SUBURB OR TOWN		POST CODE	

**DO YOU HOLD A WESTERN AUSTRALIAN DRIVER'S LICENCE OR FIREARM'S LICENCE?**

Driver's licence  Yes  No

Firearm's licence  Yes  No

Driver's licence number

Firearm's licence number

The following vehicles/trailers/boats/plates are licensed in my name:

PLATE NO./BOAT REGISTRATION No.	MAKE	BODY TYPE (eg: sedan, caravan)

SIGNATURE \_\_\_\_\_ Date: / /

This form can be downloaded from [www.transport.wa.gov.au/dvs](http://www.transport.wa.gov.au/dvs).

**OFFICE USE ONLY - DOCUMENTS AND NUMBER SIGHTED**  
PHOTOCOPIES OF DOCUMENTS MUST BE CERTIFIED

Driver's licence \_\_\_\_\_ Passport \_\_\_\_\_ Birth certificate \_\_\_\_\_

Marriage certificate \_\_\_\_\_ Deed poll \_\_\_\_\_ Business Reg. Cert. \_\_\_\_\_

Other (specify document and number) \_\_\_\_\_

Receiving officer signature \_\_\_\_\_ Branch/Office \_\_\_\_\_

Replacement / Certified MDL Issued? YES / NO Receipt Details \_\_\_\_\_

Dealing address updated? YES / NO

**IF A FIREARM'S LICENCE NUMBER HAS BEEN PROVIDED ABOVE, THIS FORM MUST BE SENT TO POLICE LICENSING SERVICES ON FAX NUMBER (08) 9454 1522 OR A PHOTOCOPY POSTED TO LOCKED BAG 9 EAST PERTH WA 6892**

OR

**IF A BOAT REGISTRATION NUMBER HAS BEEN PROVIDED ABOVE, THIS FORM MUST BE SENT TO MARINE SAFETY ON FAX NUMBER 9216 8977 OR A PHOTOCOPY POSTED TO PO BOX 402, FREMANTLE, 6959**