



Customer Identity Declaration First Nations Person

Photo Identification Card Act 2008, Tow Truck Act 1973, Transport Operations (Marine Safety) Act 1994, Transport Operations (Passenger Transport) Act 1994, Transport Operations (Road Use Management) Act 1995

Please use this form only if you are genuinely unable to provide suitable evidence of identity documentation because your birth has not been registered and either of the following apply:

- you are of First Nations descent
- you identify as a First Nations Person and are accepted as such by the community in which you live or formerly lived.

If you use this form, your application will take longer to process as at least one of the verifying persons must be contacted. This declaration will be refused if the verifying person cannot be contacted during business hours.

1. Personal details

Family name (please print)

Given name/s

Other name/s (if applicable)

(e.g. maiden name, community name or traditional name)

Residential address

Postcode

Postal address (if same as residential, write 'as above')

Postcode

Email address

First Nations community where you reside

Daytime contact phone number

Date of birth claimed

Place of birth

2. Personal declaration

Sign only in the presence of one of the verifying persons.

I declare that I have read all the answers I have given to the questions in this declaration and that the answers given by me in this declaration are complete, true and correct in every detail.

I consent to the Department of Transport and Main Roads (TMR) taking, keeping and using my personal information and documents for the purposes associated with my driver licence, industry authority, Marine Licence Indicator and Photo Identification (Photo ID) card as required under the relevant transport Acts and the Photo Identification Card Act or otherwise authorised by law.

I understand that if I have stated anything in this declaration that is false or misleading the driver licence, industry authority, Marine Licence Indicator or Photo ID card granted to me as a result of this declaration will be absolutely void and have no legal effect whatsoever.

I authorise the authorising person to make any enquiries considered necessary to verify the information provided by me in this declaration.

I understand that I may be prosecuted for giving or stating any false or misleading information.

Signature

Date

It is an offence under the relevant transport Acts or Photo Identification Card Act to state anything or give a document to an authorised person if you know it contains false or misleading information. Penalties apply.

Privacy Statement: TMR collects information on this form under the Acts nominated on this form to manage the Queensland driver licence, industry authority, Photo ID card and vehicle and ship registers. This information is accessible by authorised departmental persons and the Queensland Police Service as allowed under the relevant transport Acts and Photo Identification Card Act. Information about vehicle and ship registration may also be disclosed to vehicle insurers, statutory entities, lawyers, insolvency entities, persons involved in vehicle or ship accidents/incidents, vehicle manufacturers and to or through interstate registering authorities. Information about driver licences may also be disclosed to interstate licensing authorities as allowed under the relevant transport Acts and the Photo Identification Card Act. TMR will not disclose your personal information or documents to any other third parties without your consent unless authorised or required by law.

3. Verification of identity

The verifying person's declaration must be completed by two people from the following list:

- Community Justice Group Chairperson, Vice Chairperson or Coordinator
- Community Council Chairperson or Deputy Chairperson
- Community Councillor
- Justice of the Peace or Commissioner for Declarations.

Verifying persons' details

First verifying person (please print)

Full name

Official position/role

Daytime contact phone number

Address/Community

Postcode

Second verifying person (please print)

Full name

Official position/role

Daytime contact phone number

Address/Community

Postcode

4. Verifying persons' declaration

We the undersigned declare that _____ is recognised as being a First Nations Person and normally resides in the First Nations community of _____

We recognise their claim that their date of birth is ____ / ____ / ____

We give permission for the authorising person to contact us for any further information considered necessary for the purpose of this declaration and agree to give any further information that the authorising person may ask for to verify any statement made by us in this declaration.

We declare that, to the best of our knowledge, the information given by the person whose identity we are verifying is complete, true and correct.

We declare that the information provided by us in this declaration is complete, true and correct in every detail.

First verifying person's signature

Date

Second verifying person's signature

Date

It is an offence under the relevant transport Acts or Photo Identification Card Act to state anything or give a document to an authorised person if you know it contains false or misleading information. Penalties apply.

Office use only

On receipt of this completed form, the authorised person must confirm at least one of the verifying person's statements by telephoning the verifying person.

Evidence of identity documents (Customer)

Category type A _____

Number_____

Category type A_____

Number_____

Category type B_____

Number_____

Category type B_____

Number_____

Confirmation of verifying statements checklist

Verifying person was contacted and has confirmed statements made by them

Comments

Evidence of identity documents sighted

Comments

Decision

Has this declaration been accepted?

Yes No

Comments

Authorising person's signature

Date

____/____/____

Office stamp
