AUTHORITY CARD RENEWAL APPLICATION

**Technical Form - T008**

##### IMPORTANT INFORMATION ABOUT THIS APPLICATION

**\*\*ALL APPLICANTS MUST READ THIS IMPORTANT IMFORMATION AND MUST FOLLOW THE REQUIREMENTS OF THIS APPLICATION \*\***

**Renewal Application Criteria:**

Please ensure the following criteria are met before submitting application. If all criteria are not met then a new application (Form T007) including an inspection of the vehicle will be required.

* Your Competition Licence is still current (an Authority Card will always expire on the same day as the Competition Licence – Please ensure your Competition Licence renewal is undertaken before submitting this application
* Your vehicle has been used in a minimum of two documented (refer logbook entries) events within the last 12 months
* Your vehicle has had a Safety Audit recorded in your logbook within the past six month period
* The personal information (as detailed on the existing A/Card) has not changed
* Your vehicle information (as detailed on your existing A/Card) has not changed
* The modification categories (as detailed on your existing A/Card) are still current
* The safety equipment details (as listed on your existing A/Card) have not changed
* And don’t forget to include your MotorSport Vehicle Logbook with this application

**Note:** only the original copy of this application form can be accepted accompanied with the physical Vehicle Logbook- Electronic copies of either can not be accepted.

**Payment Details**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| PAYMENT BY CREDIT CARD: Please debit my VISA / MASTERCARD (a 2.5% surcharge applies to all credit card payments) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Card No |  | |  |  | |  | - |  |  |  |  | | - |  |  |  |  | | - |  |  |  |  | | Expires |  |
| Name of Card Holder | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| Signed | |  | | | | | | | | | | | | | | | | Date | | | | | |  | | | |
| 🞎 **Standard Processing: $75.00** | | | | | | | | | | | | 🞎 **Priority Processing + $37.50 ($112.50 total)** | | | | | | | | | | | | | | | |
| * Payment made by Internet Banking to ASB Bank **12-3192-0017344-00**   **Please reference Name and Application Type**  **Note**: Priority Processing means same day processing and courier return  GST NUMBER: 10-062-349 | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**COVID-19 Back in Motion Plan: A discount of 25% will be applied to the above costs until 31 May 2021**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| COMPETITOR DETAILS | | | | | | | | | | | | | | | | | | | | | |
| Applicant’s Name: | | |  | | | | | | | | | | | | | | | | | |  |
|  | | |  | | | | | |  | | | |  | | | | | | | | |
| MSNZ Licence No.: | | |  | | | | MSNZ Licence Expiry Date: | | | | | | | |  | | | | | |  |
|  |  | | | | | | | | | | | | | | | | | | | | |
| Full Address: |  | | | | | | | | | | | | Post Code: | | | | |  | | |  |
|  |  | | | | | | | |  | | | |  | | | | | | | | |
| Daytime Phone: | | ( ) | | |  | | | Mobile Phone: | | | | ( ) | | |  | | | | | |  |
|  |  | | |  | | | |  |  | | | |  | | | | | | | | |
| Email Address: | ………………………………………………………………………………………………………………………………………………………………………. | | | | | | | | | | | | | | | | | | | |  |
| VEHICLE DETAILS | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | |  | | | |  | | | | |  | | | |
| Vehicle Make: |  | | | | | Vehicle Model: | | | |  | | | | | | Year | | |  | |  |
|  |  | | | | | | | |  | | | |  | | | | | | | | |
| Logbook No.(**To be sent with application**): | | | | | |  | | | | | MSNZ Safety Structure No.: | | | | | | **NZ** | | | |  |
|  |  | | | | | | | |  | | | |  | | | | | | | | |
| Chassis No.: |  | | | | | | | | | | | | | Registration No: | | | | | |  |  |
|  |  | | | | | | | | | | | | | | | | | | | |  |

**APPLICATION CATEGORIES** – Tick the items detailed on the previous Authority Card

|  |  |
| --- | --- |
| **COMPETITION OCCUPANT PROTECTION SYSTEM** | **COMPETITION FUEL SYSTEM** |
| **🞏** Modified Interior (affecting interior impact standards) | **🞏** Safety Fuel Tank installed |
| **🞏** Competition Safety Harnesses (4 or more straps) | **🞏** Fuel System Filler located in cockpit (occupants space) |
| **🞏** Safety Structure (forward of front seating positions) | **OTHER** |
| **🞏** Removal of **M**anufacturer **O**ccupant **P**rotection **S**ystem | **🞏** Plastic Glazing |
| **🞏** Competition Seats or Replacement Seats fitted | **SPECIAL EXEMPTIONS - Pre-frontal Impact Compliance and LHD exemption** |
| **COMPETITION BRAKING SYSTEM** | **🞏** Pre-frontal impact compliance. (Tick box if vehicle is subject to existing exemption). Reference Technical Form T037 |
| **🞏** Hydraulic Handbrake Assembly fitted |
| **🞏** Open adjustable Brake Proportioning (bias) fitted | **🞏** LHD exemption. (Tick box if vehicle is subject to an existing exemption). Reference Technical Form T036 |
| **🞏** Braided Flexible Brake-lines fitted |
| **🞏** Electronic Stability Control (permanently disabled) |

**DECLARATION - All the information currently detailed on my Authority Card which**

**expires on** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ **is still current.**

In signing this declaration I state that all items detailed on my previous Authority Card for the above vehicle have not been changed or added to and are in a condition that enables the vehicle to be issued with a Warrant of Fitness and all renewal criteria has been met.

**APPLICANTS’ DECLARATION:** I hereby declare that the above information is correct;

Applicant Signature: Dated: \_\_\_\_ / \_\_\_\_ / \_\_\_\_