Toll Invoice Nomination Statement (Multiple)



If you have received a Linkt toll invoice and you were not the driver of the vehicle for any of the trips that appear on the toll invoice you can use this form to either (A) nominate another driver, (B) state you have sold or disposed of the vehicle and nominate the new owner, (C) state that the vehicle/number plates were stolen, (D) reject a nomination.

It is important to note:

- · If you are nominating another Individual, you must provide their Full Name and Address in section (B) of this document. If you are nominating a Company, **you must provide** either the ABN/ACN in section (B) of this document.
- · Your signature is required in section (E) of this document. If you do not sign this document, your nomination will not be accepted.
- This nomination statement must be completed in full and returned to Linkt by the due date of the toll invoice for the nomination to proceed.

Once you have completed this form in full:

- Mail to Linkt Customer Service, Reply Paid 69935, Locked Bag 28, South Melbourne, VIC 3205 or
- Email to linktdocuments@linkt.com.au or
- Fax to (03) 8656 8525

A new toll invoice may be issued to the person or company that you have nominated. If you have not nominated all trips that appear on the toll invoice you must also pay the outstanding balance by the due date.

This nomination process is subject to the Melbourne CityLink Act 1995. You should note that it is a criminal office under section 72AB of the Melbourne CityLink Act 1995 to provide false or misleading information on this form.

Se	ction A			
I, (Inc	lividual or Authorised Officer of a Company):			
Title	First name	Surname		
Com	pany Name (if applicable)			
of (Pr	ivate Address or Company Name & Address)			
Addr	ess:	City	State	Postcode
State	that at the time of the travel as stated below:			
	The actual driver(s) or owner(s) of the vehicle for th	ne relevant trip(s) were as detail	ed on the reverse side,	
OR				
	The actual driver(s) or owner(s) of the vehicle for th	e relevant trip(s) were as detail	ed on the reverse side and t	the subsequent

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identify and locate the person who was last known to have possession o OR	e of travel; and have provided sufficient information in this statement to control of the vehicle. Details to support this claim are provided below.			
I had sold or otherwise disposed of the vehicle before the time of travel, or I otherwise ceased to have any interest in the vehicle at the time of travel. I was not at that time driving or had not at that time possession or control of the vehicle. Details to support this claim are provided below.				
I state that the details of	et out below			
Title First name	Surname			
Company Name (if applicable)	ABN/ACN/ARBN			
Mailing address	City State Postcode			
Date and time the vehicle sold or disposed of (if applicable): / / am/pm				
Evidence of sale has been attached (if applicable, please staple to back of this form Yes No	n):			
Additional Information (please provide any other relevant details, do not inc	ude personal information eg driver licence number, date of birth):			
For all trips on toll invoice number:				
OR				
For the following invoices and trips only - please ensure that all details ar	completed:			
Invoice Number Trip date Star	time and location			
	\$			
Section C - Illegal User Statement I state that the vehicle was or the number plates of the vehicle were	stolen at the time of travel listed above.			
Section C - Illegal User Statement	stolen at the time of travel listed above.			
Section C – Illegal User Statement I state that the vehicle was or the number plates of the vehicle were Evidence to support my claim are attached (eg police report, please staple to be	stolen at the time of travel listed above. ack of this form):			
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identify and locate t				vided sufficient information in thi Details to support this claim are pr	
I had sold or otherwise disposed of the vehicle before the time of travel, or I otherwise ceased to have any interest in the vehicle at the time of travel. I was not at that time driving or had not at that time possession or control of the vehicle. Details to support this claim are provided below.					
I state that the details of	the actual driver, or	the new owner are s	et out below		
Title First name			Surname		
				ADAMA CAMA DDAM	
Company Name (if applic	able)			ABN/ACN/ARBN	
Mailing address			City	State	Postcode
Date and time the vehicle sold or disposed of (if applicable): /					
Evidence of sale has been	attached (if applicable, pleas	se staple to back of this form	n):		
Yes No					
Additional Information (p	lease provide any other re	levant details, do not inc	ude personal informatio	on eg driver licence number, date	e of birth):
For all trips on toll invoice number:					
_	oices and trips only - pleas	se ensure that all details at	•		
		Trip data Star	t time and location	End time and location	Trin Value
Invoice Number		Trip date Star	t time and location	End time and location	Trip Value
Invoice number		Trip date Star	t time and location	End time and location	Trip Value
Section C - Illegal U		/ /	t time and location	End time and location	\$
Section C - Illegal U	le was or the number	/ / / / plates of the vehicle were	stolen at the time of trav		\$
Section C - Illegal U I state that the vehic Evidence to support my c Yes No or Police	le was or the number	/ / / / / plates of the vehicle were	stolen at the time of trav ack of this form): State:		\$
Section C - Illegal U I state that the vehic Evidence to support my c Yes No or Polic Additional Information (e	le was or	/ / / / / plates of the vehicle were e report, please staple to be	stolen at the time of trav ack of this form): State:	vel listed above.	\$
Section C - Illegal U I state that the vehic Evidence to support my c Yes No or Polic Additional Information (e	the number laim are attached (eg police ce Incident No. g date vehicle was stolen, pation Rejection Statem	plates of the vehicle were e report, please staple to be blease staple to back of this nent (For drivers that we possession or control of	stolen at the time of travack of this form): State: s form): have been nominated the vehicle.	vel listed above.	\$
Section C - Illegal U I state that the vehic Evidence to support my c Yes No or Polic Additional Information (ed Section D - Nomina I state that, at the time of	the number laim are attached (eg police ce Incident No. g date vehicle was stolen, pation Rejection Statem	plates of the vehicle were e report, please staple to be clease staple to back of this nent (For drivers that we possession or control of icle had not been sold or details.)	stolen at the time of travenack of this form): State: s form): have been nominated the vehicle. isposed of to me.	vel listed above.	\$
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Section B – Known Driver/Sold Vehicle Nomination Statement				
I was not driving or had no possession or control of the vehicle at the time of identify and locate the person who was last known to have possession or control of the vehicle at the time of identify and locate the person who was last known to have possession or control of the vehicle at the time of identify and locate the person who was last known to have possession or control of the vehicle at the time of identify and locate the person who was last known to have possession or control of the vehicle at the time of identify and locate the person who was last known to have possession or control of the vehicle at the time of identify and locate the person who was last known to have possession or control of the vehicle at the time of identify and locate the person who was last known to have possession or control of the vehicle at the person who was last known to have possession or control of the vehicle at the person who was last known to have possession or control of the vehicle at the person who was last known to have possession or control of the vehicle at the person who was last known to have possession or control of the vehicle at the person who was last known to have possession or control of the vehicle at the vehicle at the person who was last known to the vehicle at the v				
OR				
I had sold or otherwise disposed of the vehicle before the time of travel, or I was not at that time driving or had not at that time possession or control of				
I state that the details of \Box the actual driver, or \Box the new owner are set of				
Title First name Su	ırname			
Company Name (if applicable)	ABN/	ACN/ARBN		
Company Name (if applicable)				
Mailing address City	/	State	Postcode	
Date and time the vehicle sold or disposed of (if applicable): /	n			
Evidence of sale has been attached (if applicable, please staple to back of this form): Yes No				
Additional Information (please provide any other relevant details, do not include	personal information eg d	river licence number, date o	of birth):	
For all trips on toll invoice number:]			
OR				
For the following invoices and trips only – please ensure that all details are co	•		T :- V-1	
Invoice Number Trip date Start time	ne and location E	nd time and location	Trip Value	
			\$	
			\$	
Section C – Illegal User Statement				
I state that the vehicle was or the number plates of the vehicle were sto		d above.		
Evidence to support my claim are attached (eg police report, please staple to back				
Yes No or Police Incident No.	State:			
Additional Information (eg date vehicle was stolen, please staple to back of this for	rm):			
Section D – Nomination Rejection Statement (For drivers that have	e been nominated)			
I state that, at the time of travel, I did not have possession or control of the and the vehicle had not been sold or dispo				
Evidence to support my claim has been attached (please staple to back of this form				
☐ Yes ☐ No				
Additional Information:				
Section E – Signature of the Individual or Authorised Officer of a C	ompany			
Signature Date				

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I was not driving or had no possession or control of the vehicle at the time identify and locate the person who was last known to have possession or OR				
	or I otherwise ceased to have any interest in the vehicle at the time of travel. I I of the vehicle. Details to support this claim are provided below.			
I state that the details of	et out below			
Title First name	Surname			
Company Name (if applicable)	ABN/ACN/ARBN			
Mailing address	City State Postcode			
Date and time the vehicle sold or disposed of (if applicable):				
Evidence of sale has been attached (if applicable, please staple to back of this form Yes No	n):			
Additional Information (please provide any other relevant details):				
For all trips on toll invoice number: OR For the following invoices and trips only – please ensure that all details are completed:				
Invoice Number Trip date Start	time and location End time and location Trip Value			
	\$			
Section C - Illegal User Statement				
I state that the vehicle was or the number plates of the vehicle were stolen at the time of travel listed above. Evidence to support my claim are attached (eg police report, please staple to back of this form): Yes No or Police Incident No. State:				
Additional Information (please provide any other relevant details, do not include personal information eg driver licence number, date of birth):				
Section D – Nomination Rejection Statement (For drivers that h	nave been nominated)			
I state that, at the time of travel, I did not have possession or control of and the vehicle had not been sold or di				
Evidence to support my claim has been attached (please staple to back of this				
Additional Information:				
Section E – Signature of the Individual or Authorised Officer of	a Company			
Signature Date				

I was not driving or had no possession or control of the vehicle at the time identify and locate the person who was last known to have possession or OR				
	or I otherwise ceased to have any interest in the vehicle at the time of travel. I I of the vehicle. Details to support this claim are provided below.			
I state that the details of	et out below			
Title First name	Surname			
Company Name (if applicable)	ABN/ACN/ARBN			
Mailing address	City State Postcode			
Date and time the vehicle sold or disposed of (if applicable):				
Evidence of sale has been attached (if applicable, please staple to back of this form Yes No	n):			
Additional Information (please provide any other relevant details):				
For all trips on toll invoice number: OR For the following invoices and trips only – please ensure that all details are completed:				
Invoice Number Trip date Start	time and location End time and location Trip Value			
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Additional Information (please provide any other relevant details, do not include personal information eg driver licence number, date of birth):				
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I state that, at the time of travel, I did not have possession or control of and the vehicle had not been sold or di				
Evidence to support my claim has been attached (please staple to back of this				
Additional Information:				
Section E – Signature of the Individual or Authorised Officer of	a Company			
Signature Date				