



TES 1 MULTI APP

ENTRY INTO SERVICE CONSENT FOR LARGE GOODS TRAILERS
SCHEDULE OF TRAILERS FOR A MULTIPLE APPLICATION FOR CONSENT

APPLICANT DETAILS

Company Name :			
Contact Name :			
Address :			
Postcode :		Tel. No. :	
Email :			

APPROVAL DETAILS OF TRAILERS

ID NUMBER
(Master Trailer)

Master Trailer VIN (quoted on TES 1)		
Approval Number :		
Type Approval / Variant :		

DETAILS OF IDENTICAL TRAILERS

(i.e. having identical approval details and technical specification to the Master Trailer)
PLEASE COMPLETE ALL COLUMNS

No.	VEHICLE IDENTIFICATION NUMBER (VIN)	DATE OF MANUFACTURE (dd/mm/yyyy)	ID NUMBER
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

DETAILS OF IDENTICAL TRAILERS*(i.e. having identical approval details and technical specification to the Master Trailer)***PLEASE COMPLETE ALL COLUMNS**

No.	VEHICLE IDENTIFICATION NUMBER (VIN)	DATE OF MANUFACTURE (dd/mm/yyyy)	ID NUMBER
16			
17			
18			
19			
20			
21			
22			
23			
24			
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DATA PROTECTION – We collect, use and store your personal data so that we can process your application for entry into service consent for multiple large goods trailers.

We may share your personal data if we have a lawful reason. For example as part of a criminal investigation or to prevent fraud. Find out more at www.gov.uk/dvsa/privacy.

DECLARATION : I confirm that the above listed trailers are of identical specification to the master trailer listed above.

Signed : _____ **Date** : _____

Print Full Name : _____

Please Note : A **typed signature** is acceptable if sending your form electronically.