



FAILURE TO COMPLETE THE FORM ACCURATELY OR IN FULL COULD RESULT IN DELAYS OR REJECTION

1. APPLICANT DETAILS

Title : Name :

Address :

Postcode : Tel Number :

Email Address :

Which **test location** would you prefer? :

2. VEHICLE DETAILS

Vehicle Registration Mark :

Chassis (VIN) No.:

Chassis Make : Chassis Model :

Body Make : Body Model :

Which level of compliance is to be shown on the accessibility certificate? (A separate vehicle specification form will need to be completed and submitted with this application).

Wheelchair Accessibility Only

General Accessibility Only

Wheelchair and General Accessibility

3. DATA PROTECTION, DECLARATION AND SIGNATURE

DATA PROTECTION – We collect, use and store your personal data so that we can process your application for a PSV accessibility type approval certificate.

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, as far as I know, all statements in this application are true.

Signature :

Print Full Name : Date :

Please Note : All 'Declaration' sections above must be completed. A typed 'Signature' is acceptable if sending your form electronically.

4. PAYMENT DETAILS

You can pay the application fee by one of the following methods :

1. **Cheques/Postal orders** - Payable to the **'Driver and Vehicle Standards Agency'** (or **'DVSA'**) and only accepted with postal applications.
2. **Credit/Debit card** - If you choose to pay by this method, then once your application has been received, you will be **contacted by email with instructions on how to arrange your card payment.**
3. **DVSA Pre-Funded Account** - If you are a regular user of the scheme this is the quickest method to use. For customer pre-funded accounts, the signatory on the application must be a delegate authorised to use the account. Find out how you can [apply for a DVSA pre-funded customer account.](#)

You can see the [Vehicle Approvals fees online](#). Alternatively, you can telephone our **Customer Service Centre on 0300 123 9000.**

How are you paying for this application? *(Please tick one box)*

Cheque / Postal Order *Payable to 'Driver and Vehicle Standards Agency' or 'DVSA' (only with postal applications).*

Credit / Debit Card *Payment to be made after application is received.*

DVSA Customer Account **Account 'C' No. :**

I hereby authorise the **Driver and Vehicle Standards Agency** to take the amount stated below from my bank / pre-funded customer account in respect of my application.

£ .

Signature details : Please sign and print your name below if you are either the **card holder** or **DVSA account delegate**. A typed **'Signature'** is acceptable if sending your form electronically.

Signature : _____ **Date :** _____

Print Full Name : _____

ON COMPLETION

Use the service to [Apply for a vehicle test or certificate for a coach or bus](#) to send your **fully completed** form to the Driver and Vehicle Standards Agency (DVSA).

DVSA Customer Service Centre - 0300 123 9000