

APPLICATION FOR DIRECTION Alcohol Interlock

Section 50AAAC Road Safety Act 1986

		Court Reference:	
			(Registrar to complete)
Applicant:			
Date of Birth:		Licence/Perm	it Number:
Address:			
Email:			Phone:
On condition from alcohol.	•	nt of Transport & Planning made a determ ner permit due to a failed attempt(s) to sta	
DETAILS OF F	AILED ALCOHOL INTERLO	CK ATTEMPT(S) SUBJECT TO THIS APPL	CATION
Number	Date	Time	
1.		* am / pm	
2.		* am / pm	
3.		* am / pm	
4.		* am / pm	
5.		* am / pm	
CDOUNDS FO	NO AAAWANG TUUS ADDUUSA	TION	
	OR MAKING THIS APPLICA	Department of Transport & Planning that I	
attempt(s) on	the following grounds:		
ATTACHED D	OCUMENT(S) / INFORMA	TION (required to be attached to the ap	nlication)
	·	partment of Transport & Planning regardir	ng decision not to remove alcohol
Data obtingphotogram		erlock relating to the failed attempt(s) that se identity of the person who made the att	
Date:		(Signed) Applicar	
LISTING OF AI	PPLICATION (registrar to co	omplete)	
This application	on is listed for hearing befo	re Magistrates' Court as	
at	* am / pm	on (date) (Date must be at least 28 days in advance))
			
Date:			
			Magistrates' Court

PLEASE NOTE: