Abnormal Vehicle Registration : DOLLY

DEPARTMENT OF TRANSPORT

Owner

Address

Tel.No.

OFFICIAL USE

Seq. No.	KN	2					
Reg. Date							

Registration No

Make

VIN

Model

Unladen Mass kg

M.G.V.M. kg

Max on 5th Wheel kg

Max load on Kingpin kg

*Wheel Codes:	**Tyre Types:
Single	X-Ply
Dual	Radial
4 Single	Mich
4 Dual	

Axles

No of Axles

Unladen Axle Unit Mass kg

Axle Unit Rating kg

Wheel Code *

Tyres

Tyre Type **

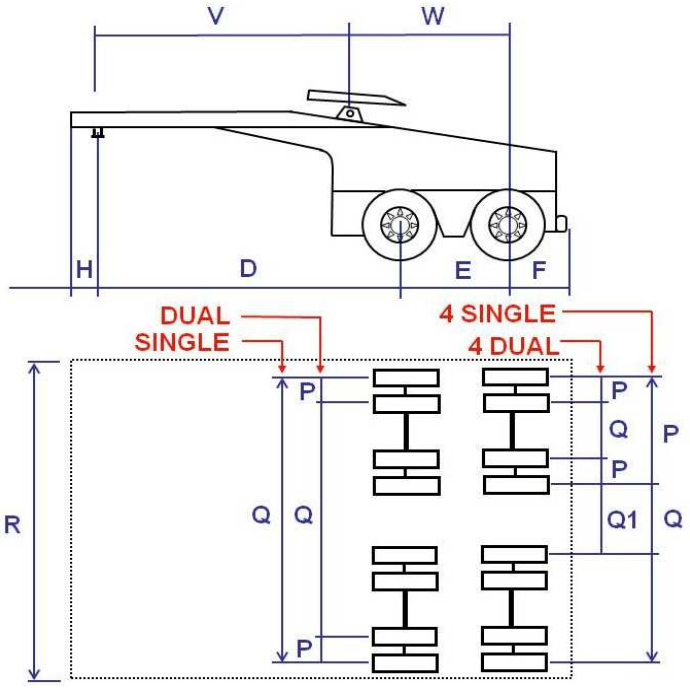
Tyre Size

Ply

Dimensions (mm)

H D E F V W

R P Q Q1



I certify that the details given above are correct in all respects:

Signature: _____ Completed by _____ Owner

Date: _____

OFFICIAL USE

Received by: _____

Date: _____