

# Request for EFTPOS login records

The Taxi Services Commission will grant you access to your personal information that we hold, unless doing so would: pose a serious and imminent threat to the life or health of any individual; unreasonably invade someone else's privacy; be vexatious or frivolous; interfere with the enforcement of the law; reveal the intention of negotiations between you and us and prejudice these; be unlawful; or if denying access is required or authorised by law.

Name:

Mailing address:

<input type="text"/>	
<input type="text"/>	Postcode: <input type="text"/>

Date of birth:

Telephone:

Mobile:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Driver accreditation number:

Driver licence number:

Vehicle registration number:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Requested login date and time:

Operator name:

Operator contact:

Reason for this request?

Signature of applicant:

Date:

Allow 5-10 working days for processing of this request. A response will then be sent to the above listed mailing address

## OFFICE USE ONLY

Did you sight driver licence?

Yes

No

Did you sight driver accreditation?

Can you verify that it is the person nominated in the infringement notice?

Print name: \_\_\_\_\_ Sign: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_