

APPLICATION FOR MOT AUTHORISATION OR A VARIATION TO MOT AUTHORISATION



Vehicle & Operator Services Agency

Please read the Completion Notes (Appendix 1) carefully before legibly entering the details in the white boxes provided using **black ink** and in **BLOCK CAPITALS**, sections can be photocopied as required.

You should have read and understood the responsibilities of an AE (or DC) as set out in the MOT Testing Guide before completing this form.

Part A

SECTION A1 Please the box in the right hand column to select the reason for the your application

Reason for Application	Sections to Complete	<input checked="" type="checkbox"/>
New AE or DC applying for Authorisation to operate a new VTS	A (except A2) B C	
New AE or DC applying for Authorisation to operate an approved VTS (this VTS must currently be conducting MOT Tests)	A (except A2) B C1 and C3	
New AE or DC applying for Authorisation to operate a previously approved VTS (this VTS is not currently conducting MOT Tests)	A (except A2) B C	
Approved AE or DC applying for Authorisation to operate a new VTS	A1, A2, A4, A8 C	
Approved AE or DC applying for Authorisation to operate an approved VTS (this VTS must currently be conducting MOT Tests)	A1, A2, A4, A8 C1 and C3	
Approved AE or DC applying for Authorisation to operate a previously approved VTS (this VTS is not currently conducting MOT Tests)	A1, A2, A4, A8 C	
Notification of changes to an approved VTS	A1, A2, A8 C	
Notification of changes within the authorised business entity.	A B (if applicable)	
Please state the reason for change to the authorised business entity.		
Please enter the proposed date the entity change is to take place.		
Multi - site applications please enter your preferred VOSA Lead Area Office.		

SECTION A2 Current AE Number

If you are currently Authorised, what is your AE number?	
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SECTION A3 Entity Details

1 What is your business entity? Please <input checked="" type="checkbox"/> one of the following options			
a Company <input type="checkbox"/>	b Partnership <input type="checkbox"/>	c Sole Trader <input type="checkbox"/>	d Designated Council <input type="checkbox"/>
2 Business Entity Name			
3 Registered Office Address (including post town)			
4 Postcode		5 Telephone	
6 Fax number		7 E-mail	
8 Correspondence Address (including post town)			
9 Postcode		10 Telephone	
11 Fax number		12 E-mail	
13 Registered Company Number			
14 Companies House Record of Appointments or Partnership Agreement is included with this application (if applicable)			
15 Letter authorising a person to act on behalf of the business entity is included with this application (a Duly Authorised Person is not applicable to Sole Traders)			
16 Enter the full name(s) of all the AEP's connected to this Authorisation?			

SECTION A4 Accounts

1 If you will be operating more than one VTS which type of MOT Account do you wish to hold?
2 Bankers reference or other evidence of sound financial standing included with this application. (For new AEs only)

SECTION A5 Authorised Examiner Designated Manager (AEDM)

1 Title	2 Gender	3 Date of Birth
4 First Name	5 Middle Name	
6 Surname	7 Driving Licence Number	
8 Home Address		
(including post town)		9 Postcode
10 What date did you attend the MOT Managers Course?		
11 I have completed and returned an MOT Managers' Course Application form (if applicable)		
12 If you have held, or are currently holding an appointment or role within the MOT Scheme <input checked="" type="checkbox"/> this box.		
13 If <input checked="" type="checkbox"/> to A5.12, what is your User Identification Number (if known)?		
14 If <input checked="" type="checkbox"/> to A5.12, what is/was the AE Number (if known)?		
15 If <input checked="" type="checkbox"/> to A5.12, what is/was the VTS Number (if known)?		
16 Authorised Examiner Designated Manager (AEDM) declaration I (the person named at A5.4 - A5.6) have read all the relevant sections within the current MOT Testing Guide, and fully understand the role of an AEDM and the obligations placed on me.		
Signature		Date

SECTION A8 Statement of Responsibilities

All statutory testing must be conducted in accordance with the requirements of Section 45 of the Road Traffic Act 1988; the Motor Vehicles (Tests) Regulations, the MOT Inspection Manual, the MOT Testing Guide and supplementary information issued from time to time by VOSA. When these requirements are amended or superseded testing must be carried out in accordance with the requirements applicable at the time of test.

All statutory testing must be carried out:

- a) at the premises shown on the authorisation certificate (VT9);
- b) using only the equipment and facilities specified in this application or later agreed by VOSA as being acceptable and which is maintained in good working order and equipment calibrated at the required intervals;
- c) only on those classes of vehicle for which authorisation has been granted;
- d) only by persons who are listed on the MOT Computerisation System as testing and are included on the list of testers displayed at those premises;
- e) utilising an assistant for those parts of the tests requiring it;
- f) without avoidable distraction or interruption.

Any vehicle of a class for which authorisation is granted must be accepted for test, unless it is of such size or weight that it cannot be properly or safely tested on the approved facilities. If a test cannot be carried out immediately, an appointment must be offered at the earliest practicable time subject to;

- a) physical limits;
- b) reasons for not starting test.

Unused Emergency Test Certificates should not be accessible at any time to unauthorised persons. Thefts or losses must be reported to the local Police immediately and to the local VOSA office within one working day.

Reasonable precautions must be taken to ensure that all Smart Card users safeguard the cards including the spare and the Passwords for which they are responsible.

Full responsibility for the actions of persons nominated to carry out tests and for ensuring that acceptable standards of statutory testing are maintained rests upon the AE or DC.

AEs must notify the VOSA local office of any criminal conviction of the AE, one of its partners, directors or officers of the company, whether or not the conviction arises from action related to the authorisation, as soon as practicable.

AEs must, as soon as practicable, notify the VOSA local office of convictions of any of their NTs for an offence that is either directly connected with their MOT testing activities, that may have a bearing on the MOT testing scheme or that involved acts of violence or intimidation.

Authorisation may cease for any failure to comply with the requirements set out above or if any statement made in this application is untrue.

Declaration. I declare that:

- the information provided in Part A and its supporting documentation is, to the best of my knowledge, true and correct;
- I have read, understood and accept the above Statement of Responsibilities and have the authority to accept it on behalf of the applicant(s).

Signature	Full Name (Print)	Date
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You are advised to retain a copy of this Statement as a reminder of your responsibilities.

Part B (photocopy this part as required)

Each Authorised Examiner Principal must complete a separate Part B

SECTION B1 Authorised Examiner Principal(s) (AEP) Personal Details

1 Title	2 Gender	3 Date of Birth	
4 First Name		5 Middle Name	
6 Surname		7 Driving Licence Number	
8 Home Address (including post town)			9 Postcode
10 If you have held, or are currently holding an appointment or role within the MOT Scheme <input checked="" type="checkbox"/> this box.			
11 If <input checked="" type="checkbox"/> to B1.10, what is your User Identification Number (if known)?			
12 If <input checked="" type="checkbox"/> to B1.10, what is/was the AE Number (if known)?			
13 If <input checked="" type="checkbox"/> to B1.10, what is/was the VTS Number (if known)?			
14 Two character references for the person listed in B1.4 - B1.6 are included with this application			
15 IMPORTANT Data Protection Act 1998; if you AGREE to your details being released <input checked="" type="checkbox"/> this box			

SECTION B2 Personal Declaration of Non Conviction

I (the person named at B1.4 - B1.6 as a * Sole Trader / Partner / Company Secretary / Company Director (* delete as appropriate) of the business entity named at A3.2 confirm that I have **NO UNSPENT CRIMINAL CONVICTIONS** in accordance with the Rehabilitation of Offenders Act 1974.

I am aware that if, in the future it is brought to VOSA's attention that there are any unspent convictions that have not been disclosed, this may result in the cessation of authorisation to carry out statutory testing. Cessation may occur even though the unspent conviction may not have been of a nature that would have led to refusal on the initial VT01 application.

Declaration. I declare that all the above information, to the best of my knowledge, is true and correct. (This statement must be signed by the person named at B1.4 – B1.6)			
Signature		Full Name (Print)	Date

SECTION C3 VTS Nominated Testers and Proposed Nominated Testers Details (if known)

1	<input checked="" type="checkbox"/> the box if the identity of your Nominated Testers for this site are unknown
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2 Title	3 Gender	4 Date of Birth	
5 First Name		6 Middle Name	
7 Surname		8 Driving Licence Number	
9 What is their User Identification Number (if known)?			

2 Title	3 Gender	4 Date of Birth	
5 First Name		6 Middle Name	
7 Surname		8 Driving Licence Number	
9 What is their User Identification Number (if known)?			

2 Title	3 Gender	4 Date of Birth	
5 First Name		6 Middle Name	
7 Surname		8 Driving Licence Number	
9 What is their User Identification Number (if known)?			

2 Title	3 Gender	4 Date of Birth	
5 First Name		6 Middle Name	
7 Surname		8 Driving Licence Number	
9 What is their User Identification Number (if known)?			

2 Title	3 Gender	4 Date of Birth	
5 First Name		6 Middle Name	
7 Surname		8 Driving Licence Number	
9 What is their User Identification Number (if known)?			

2 Title	3 Gender	4 Date of Birth	
5 First Name		6 Middle Name	
7 Surname		8 Driving Licence Number	
9 What is their User Identification Number (if known)?			

2 Title	3 Gender	4 Date of Birth	
5 First Name		6 Middle Name	
7 Surname		8 Driving Licence Number	
9 What is their User Identification Number (if known)?			

2 Title	3 Gender	4 Date of Birth	
5 First Name		6 Middle Name	
7 Surname		8 Driving Licence Number	
9 What is their User Identification Number (if known)?			

APPENDIX 1 – COMPLETION NOTES FOR APPLICATION FOR MOT AUTHORISATION

Introduction

Applicant Authorised Examiners (AE) or Designated Councils (DC) must use this VT01 form to apply for Authorisation to operate a Vehicle Testing Station (VTS) on behalf of the Secretary of State for the Department for Transport.

You should have read and understood the responsibilities of an AE or DC before completing this form.

You can use this form to notify VOSA of certain changes to an Authorisation e.g. a change in status of a VTS or a change in the equipment within a VTS.

The legal entity that will hold full control and responsibility for MOT testing functions must complete this application and complete Section A10. You must have read the MOT Testing Guide (paying particular attention to Sections B and D). VOSA must be informed where possible before any change to the legal entity takes place, otherwise testing must cease immediately the change occurs.

Before carrying out any building or alterations to existing premises or installing equipment, you should ensure that your proposals meet the current requirements and are acceptable to VOSA. The installation of Acceptable Equipment in premises that appear suitable does not mean that you will be authorised.

Complete only the Section(s), as listed in the table at Part A Section A1, which are appropriate to your application. Should you require any further information please refer to the MOT Testing Guide or contact the VOSA Enquiry Unit by telephone on 0845 6005977 * or by E-mail to enquiries@vosa.gov.uk.

Note: Your failure to supply the required documents (as applicable) that fully comply with the requirements of the MOT Testing Guide, may lead to your application being delayed. For more information on what these documents must contain, please refer to the MOT Testing Guide.

PART A

SECTION A1

Where the application is received from a multi - site AE the VOSA Lead Area Office is usually determined by the location of the AE Registered Office address. However, Multi - site AEs may request to be administered by an Area Office outside of the Registered Office address Enforcement Area. This may be beneficial to your company when the AEDM is normally located away from the Registered Office. Please enter your preferred VOSA Lead Area Office location in the box provided.

SECTION A2 Current AE number

Please enter your current AE number. Your AE number is on your VT9 Authorisation Certificate.

SECTION A3 Entity Details

An AE (DC) is the legal business entity that operates and manages one or more VTSs and is responsible for controlling the quality of testing carried out.

With the exception of a Sole Trader the AE (DC) is **not** a person but the legal entity, for example a partnership, a company or local authority.

8 Only complete these address details if they are different from those given in A3.3.

16 Authorised Examiner Principals (AEPs) are legally responsible for the entity. This must be the Sole Trader, a partner, a director, senior manager or an officer of a company or the Chief Executive Officer (CEO) of a Designated Council.

SECTION A4 Accounts

All authorised business entities are required to maintain a VOSA account known as an MOT Account. This will be used to pay for test slots, training courses, stationery and other catalogue items. You may already operate one of VOSA's Pre - Funded Accounts however; you will not be able to make payments for MOT purchases from that account.

1 Multi - site AEs have the option of setting up an account in one of two ways:

- a) VTS Accounts puts each VTS within an Authorisation under a separate account. This means that a person can only order for the one VTS. However the AE may give the same person the ordering role for more than one VTS if they so wish. Monies will have to be paid into each of the accounts for a VTS within the organisation separately. There can only be one VTS Account for each Vehicle Testing Station,

- b) AE Accounts (Only applicable to multi - site AEs). This links all the VTSs within an Authorisation under a single account. Anyone who the AE allows to order goods and services on the account can do so for any VTS in the organisation. An AE may choose to give the role to one, or more persons for the whole of the Authorisation or appoint someone at each VTS within the Authorisation. Money paid into the account may be used by anyone with an account management role to order goods and services for any VTS in the Authorisation.

You must decide to operate **either** one or the other. The account type may be altered at any time to reflect the changing circumstances of the AE.

SECTION A5 Authorised Examiner Designated Manager (AEDM)

Every business entity applicant must nominate an AEDM.

This person who will be appointed by VOSA must be;

- the Sole Trader or
- the partner who will exercise the most direct control over all MOT testing operations or
- an officer of a company or a senior manager of that company having direct responsibility for all MOT testing operations at all sites or
- a senior council officer having direct responsibility over MOT testing operations.

The nominated person will normally have attended and successfully completed VOSAs MOT Managers Course or hold an AE Certificate of Training prior to the granting of Authorisation.

3. This information will only be used to identify the applicant.

10 Please note that the MOT Managers Course was previously known as the AEs Course.

13 – 15 If the AEDM has held a previous role or currently holds a role within the MOT Scheme then their User Identification Number is required (this can be found on their MOT Smart Card) together with the VTS and AE number associated with their last role.

SECTION A6 and A7 Company or Partnership Details of Non - Conviction or Conviction

A declaration is required in respect of the partnership or company. This must be made and signed by the Duly Authorised Partner of a Partnership, an Officer of the Company, a Duly Authorised Person in a company or partnership, or the CEO in a Designated Council.

Complete **either** A6 or A7 in full as appropriate.

Note: A conviction is any penalty imposed by a Court of Law from an absolute discharge to a prison sentence.

SECTION A8 Statement of Responsibilities

The Statement of Responsibility **must** be completed by a Sole Trader, a Duly Authorised Partner of a partnership, an Officer of the Company, a Duly Authorised Person in a company or partnership, or the CEO in a Designated Council.

PART B

SECTION B1 Authorised Examiner Principal(s) (AEP)

AEPs are legally responsible for the entity. Each partner in a partnership; each director, Company Secretary or each officer of a company; or the Sole Trader in person that are listed in A4.16 must complete and submit separate AEP personal details using Part B.

3. This information will only be used to identify the applicant.

11 - 13 If the AEP has held a previous role or currently holds a role within the MOT Scheme then their User Identification Number is required (this can be found on their MOT Smart Card) together with the VTS and AE number associated with their last role.

15 **IMPORTANT** Data Protection Act 1998, tick the box if you wish your details to be released. Note this box can only be actioned by the AEP named.

SECTION B2 Personal Declaration of Non Conviction (for AEPs)

Each AEP must complete and submit separate Personal Declaration of Non Conviction.

Note: A conviction is any penalty imposed by a Court of Law from an absolute discharge to a prison sentence until spent under the Rehabilitation of Offenders Act 1974. However, it does not include fixed penalty offences.

PART C

SECTION C1 Vehicle Testing Station (VTS) details

A separate Part C must be completed for each VTS applied for

1 The VTS number is on the Authorisation Certificate (VT9).

A VTS is the approved site where the Authorised entity carries out MOT tests. To ensure that any proposed site is acceptable please refer to the MOT Testing Guide.

If you are applying for more than one site, please photocopy this section and supply the details of each VTS on a separate sheet.

2 Enter the trading name of this VTS in full.

8 For a full list of vehicle classes and their descriptions, please refer to the MOT Testing Guide.

10 For a full list of Automated Test Lane (ATL) requirements, please refer to the MOT Testing Guide.

11 For a full list of One Person Test Lane (OPTL) requirements, please refer to the MOT Testing Guide.

12 Only complete this section if you wish to replace or modify any fixed test equipment or to alter buildings or layout of test equipment. You must confirm in writing - with supporting drawings - that the Requirements for Authorisation will not be contravened by the changes. You must obtain VOSA Area Office approval for the proposed changes before putting them in hand. No proposed change will be acceptable if it reduces clearances or dimensions (including those for access) below the limits specified in the Requirements for Authorisation or, for features approved only as 'acceptable variations', below their existing values. Some minor changes to the details shown on the VT9 can be notified to the VOSA local office via the VTS Device.

13 For more information on what this document must contain please refer to the MOT Testing Guide.

SECTION C2 Plans and Dimensions

1 – 3 For more information on what these documents must contain please refer to the MOT Testing Guide.

Enclosures

Please ensure you enclose the following documents where appropriate;

- Either proof of ownership or proof of exclusive use;
- Either planning permission or evidence of established use;
- A site plan showing the location of testing premises;
- A fully dimensioned drawing of the test bay(s);
- A copy of the Company House Record of Appointments;
- A copy of the partnership agreement;
- Financial reference for the entity;
- Two character references for each AEP;
- Any additional separate personal declaration of non conviction.

SECTION C3 VTS Nominated Testers Details

1 If the Nominated Testers details are not known at this initial application, please the box.

2 – 9 Complete the details of all Nominated Testers and proposed Nominated Testers that will be testing at this VTS. Note - The authorisation of your site cannot be completed until at least one acceptable Nominated Tester has been identified.

3. This information will only be used to identify the applicant.

Please return all the completed sections of this form to your local VOSA Area Office address. All the VOSA Area Office addresses are listed in Appendix 9 of the MOT Testing Guide.

PLEASE DO NOT ENCLOSE THIS NOTES APPENDIX WITH YOUR APPLICATION

* Calls provided by BT will be charged at up to 4 pence per minute at all times. A call set-up fee of 3 pence per call applies to calls from residential lines. Mobile and other providers' charges may vary.