



Please complete the relevant sections of this form and sign in Section 5 overleaf. Please print clearly in ink using BLOCK letters.  
Postal Address: Refunds Section GPO Box R1290 Perth 6844

What type of refund are you applying for? (please mark one circle only)

- Licence Refund - licence surrendered, concession, payment error (complete sections 1, 2, 4, 5)
- Application fees – learner permit, HPT, driving assessment fees (complete sections 1, 3, 4, 5)

### Section 1 - Your Personal Details

DRIVER LICENCE/PERMIT NUMBER

[Redacted]

[Redacted]

[Redacted]

[Redacted]

### Section 2 - Licence Refund

#### Reason for Refund

- Voluntary Surrender** WA Licence surrendered as no longer required (this excludes where transferred interstate)

[Redacted]

- Deceased**

[Redacted]

Licence Number of deceased [Redacted]

Is refund to be in the name of deceased?  YES  NO

If no, Executor or Executrix of the estate to complete details in Section 4(a) overleaf.

- Concession**

Pensioner Concession

[Redacted]

Seniors Concession

[Redacted]

*Concession application form must be completed and pension or Seniors card presented*

- Payment error**

e.g. driver renewal paid twice in error. Please provide details of the payment error in Section 4 and attach the original copy of the incorrect receipt to this form. If it has been lost or destroyed please write the circumstances in Section 4.

### Section 3 - Application Fees

- Learner permit fee paid in error
- Hazard Perception Test fee paid in error
- Extension application fee paid in error
- Practical Assessment fee paid in error
- Licence application fee paid in error
- Other - please complete details in Section 4
- Heavy Vehicle testing fee paid at incorrect rate. Assessment carried out by service provider. (please complete details below).

[Redacted]

Attach the original receipt to this form. If you no longer have receipt please write circumstances in Section 4.

**Section 4 - Further Details (use this section if additional space is required or requested to do so)**

[Redacted area]

**Section 4a - to be completed if requested to do so for 'Deceased' refund**

As Executor/Executrix of the Estate I authorise payment of refund to the following beneficiary:

[Redacted area]

**Section 5 - Claimant's (or Agent's) Signature**

[Redacted area]

If you are submitting application on behalf of claimant, complete this section.

[Redacted area]

[Redacted area]