



CHANGE OF VEHICLE PASSPORT OWNER

PLEASE PRINT CLEARLY WITH BLUE OR BLACK INK

Date:

AASA Passport No:

Name of New Vehicle Owner:

Address:

City: State: Postcode:

Phone: (Mobile)

..... (Business)

Email:

Name of Previous Vehicle Owner:

Address:

City: State: Postcode:

Please email this Change of Vehicle Passport Owner Application to info@aasa.com.au.

If you are issued with the old Version of the Vehicle Passport, please forward this Change of Vehicle Passport Owner Application and your Vehicle Passport to

Australian Auto-Sport Alliance Pty. Ltd.
PO Box 249
Benalla VIC 3671.

If further information is required, please contact: (03) 5721 7800 or info@aasa.com.au.



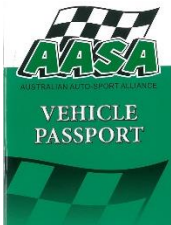
Administration Fee: \$ 20.00

Credit Card Details:

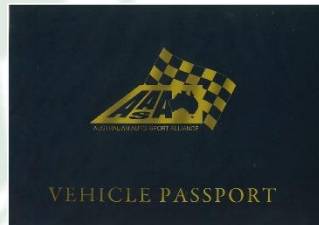
Type of Card: M/Card Visa Name shown on Card:

Card No: Exp.:/.....

Date Application Received: Date of Issue:



New Vehicle Passport



Old Vehicle Passport