

**APPLICATION FOR INDIVIDUAL VEHICLE APPROVAL (IVA)**  
 Passenger cars having no more than 8 seats in addition to the driver's – M1  
 Goods vehicles having a gross vehicle weight not more than 3500kgs – N1  
 The Road Vehicles (Approval) Regulations 2009

<b>Official Use Only</b>		
Station Instruction	Model Report Number	Z Number

Before completing this form, you **MUST READ** and understand the information provided in the **GUIDANCE NOTES**.  
 Please **do not** submit the Guidance Notes with the application.

**FAILURE TO COMPLETE THE FORM ACCURATELY OR IN FULL COULD RESULT IN DELAYS**

**1. OWNER AND PRESENTER CONTACT DETAILS** *(See note 1 in Guidance Notes)*

PRESENTER <i>(if different from owner)</i>			OWNER		
Full Name	Title		Full Name	Title	
Address :			Address :		
Postcode :			Postcode :		
Contact Tel No :			Contact Tel No :		
E-mail :			E-mail :		

**2. APPOINTMENT AND PAYMENT DETAILS** Please tick/complete the appropriate boxes below ▼  
*(See note 2 in Guidance Notes)*

**PLEASE NOTE : DATE & TIME OF YOUR IVA TEST WILL BE ALLOCATED BY YOUR CHOSEN TEST STATION AND NOT BY VOSA SWANSEA**

2a. Which Test Station would you prefer?	or	
2b. When would you like the test? DAY		AM <input type="checkbox"/> PM <input type="checkbox"/> ASAP <input type="checkbox"/>
2c. Payment Method : You will be contacted by telephone for Credit / Debit card payments.		
Cheque <input type="checkbox"/>	Postal Order <input type="checkbox"/>	Credit or Debit card <input type="checkbox"/> (ONLY when application is presented in person)
		Cash <input type="checkbox"/> Pre-funded Account <input type="checkbox"/>

**3. VEHICLE DETAILS** Please tick/complete the appropriate boxes below ▼  
*(See note 3 in Guidance Notes)*

3a. Vehicle Identification Number (VIN) or chassis number													
3b. Position of stamped VIN on vehicle													
3c. Vehicle Make and full model description													
3d. What is the date of manufacture?							Month		Year				
3e. Has the vehicle been previously registered (in any country)							YES	<input type="checkbox"/>	NO	<input type="checkbox"/>			
<i>If 'YES' please confirm the date of first registration ►</i>							Month		Year				
3f. Has the vehicle been imported into the UK?							YES	<input type="checkbox"/>	NO	<input type="checkbox"/>			
<i>If 'YES', from which country and when?*</i>										Date :			
<i>(*Only confirm date if applying as a Personal Import class)</i>													
3g. Is the vehicle a passenger or goods?							Passenger	<input type="checkbox"/>	Goods	<input type="checkbox"/>			
3h. What is the body type of the vehicle e.g. 3 door hatch, saloon, estate?													

Continued overleaf ►

**3. VEHICLE DETAILS CONTINUED...**Please tick/complete the appropriate boxes below ▼  
(See note 3 in Guidance Notes)3i. Is the vehicle : Petrol  Diesel  Gas  Hydrogen  Other (please state) 3j. What is the engine size? (Please confirm 'cm<sup>3</sup>' of engine)  cm<sup>3</sup>3k. What is the number and arrangement of cylinders?  
(Please Note : for classes A, C & L ONLY) \* 3l. What is the engine number? 3m. Where is the engine number located? 3n. Is the engine : Turbocharged  Non Turbocharged 3o. Is the gear box : Manual  Automatic 3p. Does the vehicle have anti-lock brakes (ABS)? YES  NO 3q. How many designated seating positions does the vehicle have including the driver's? 3r. If the vehicle is a 4x4, is it : Permanent 4x4  Selective 4x4 3s. What is the maximum design road speed of the vehicle?  
(DO NOT take this figure from the speedometer – see note 3 in Guidance Notes)  mph3t. What is the engine maximum power **AND** the engine speed at which it is obtained?  
(DO NOT take these figures from the rev counter – see note 3 in Guidance Notes)  
 kw @  rpm  
OR  
 bhp @  rpm

3u. What are the design weights of the vehicle? \*

Note : This applies to - all 'converted' vehicles where weights have been allocated that are higher than those provided by the original manufacturer, all goods vehicles and vehicles of classes A, C, L and S only.

\* Refer to the weights plate on the vehicle, or the vehicle handbook or contact the manufacturer for this information.

Axle 1 lbs / kgs	<input type="text"/>	Axle 2 lbs / kgs	<input type="text"/>	Axle 3 lbs / kgs	<input type="text"/>	Gross lbs / kgs	<input type="text"/>	Train lbs / kgs	<input type="text"/>	Towable Mass lbs / kgs	<input type="text"/>
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If the vehicle is a 'converted vehicle', and the weights shown above are higher than those allocated by the original manufacturer, please provide the original weights.

Axle 1 lbs / kgs	<input type="text"/>	Axle 2 lbs / kgs	<input type="text"/>	Axle 3 lbs / kgs	<input type="text"/>	Gross lbs / kgs	<input type="text"/>	Train lbs / kgs	<input type="text"/>	Towable Mass lbs / kgs	<input type="text"/>
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3v. Is the vehicle fitted with : Immobiliser  Alarm  Not Fitted **4. VEHICLE CLASS**Please tick/complete the appropriate boxes below ▼  
(See note 4 in Guidance Notes)4a. You must tick at least one box, in some cases more than one. Please refer to the Guidance Notes for detailed descriptions of all the classes listed below and any relevant supporting documents that must be sent with your application.

<b>N</b> <input type="checkbox"/> Left Hand Drive	Go to Part 6	<b>L</b> <input type="checkbox"/> A vehicle manufactured in very low volume	Go to Part 7
<b>P</b> <input type="checkbox"/> Personal Import	Go to Part 7	<b>R</b> <input type="checkbox"/> A vehicle not meeting any other category and therefore requiring a Normal IVA	Go to Part 5
<b>A</b> <input type="checkbox"/> Amateur Built	Go to Part 7	<b>E</b> <input type="checkbox"/> European Approved (see Guidance Notes)	Go to Part 5
<b>S</b> <input type="checkbox"/> Rebuilt Vehicle	Go to Part 7	<b>T</b> <input type="checkbox"/> Armoured Vehicle *	Go to Part 6
<b>C</b> <input type="checkbox"/> A vehicle built by a person in the business of building vehicles, using parts of a vehicle registered in the UK (see Class 'C' question below)	Go to Part 7	<b>M</b> <input type="checkbox"/> Hearse, Motor Ambulance or Caravan *	Go to Part 6
		<b>W</b> <input type="checkbox"/> Wheelchair Accessible Vehicle*	Go to Part 6

\*Special Purpose Vehicles (see Guidance Note 4)

Donor Registration Number (class 'C' only) : 

Continued overleaf ►

<b>4. VEHICLE CLASS CONTINUED...</b>	Please tick/complete the appropriate boxes below ▼ (See note 4 in Guidance Notes)
Please list below the major parts used from the donor vehicle (applies to class 'C' only) ▼	

<b>5. CLASS 'R' ONLY</b>	Please tick/complete the appropriate boxes below ▼ (See note 5 in Guidance Notes)
5a. Does the vehicle display a European Type Approval number on the manufacturer's plate?	YES <input type="checkbox"/> NO <input type="checkbox"/>
If 'YES' please write the Type Approval Number here ► <input style="width: 200px;" type="text"/>	
If 'YES' what is the recorded mileage (including the mileage before any modification)?	<input style="width: 100px;" type="text"/> m or km
5b. Has the vehicle had a 'One-off' Test? <i>(Please refer to the Guidance Notes for more information)</i>	YES <input type="checkbox"/> NO <input type="checkbox"/>
If 'YES' please write the Test Report Number here (if known) ► <input style="width: 200px;" type="text"/>	
5c. Is the vehicle a precedent vehicle used to create a Model Report?	YES <input type="checkbox"/> NO <input type="checkbox"/>
If 'YES' please write the Test Report Number here (if known) ► <input style="width: 200px;" type="text"/>	
5d. Is the vehicle to be tested against an existing Model Report?	YES <input type="checkbox"/> NO <input type="checkbox"/>
If 'YES' please write the Model Report Number here (if known) ► <input style="width: 200px;" type="text"/>	

<b>6. CONVERTED VEHICLES ONLY</b>	Please tick/complete the appropriate boxes below ▼ (See note 6 in Guidance Notes)
6. Is your vehicle <u>now</u> a passenger vehicle, with no more than 8 passenger seats that has been :	
a. converted into a 'limousine' by increasing the number of seating positions?	YES <input type="checkbox"/> NO <input type="checkbox"/>
b. converted from a passenger vehicle that had more than 8 passenger seats?	YES <input type="checkbox"/> NO <input type="checkbox"/>
c. converted from a goods vehicle (this includes wheelchair accessible vehicles)?	YES <input type="checkbox"/> NO <input type="checkbox"/>
d. converted from a goods vehicle that has a design weight of 1500kgs or more?	YES <input type="checkbox"/> NO <input type="checkbox"/>
<i>Please note : if you have ticked 'YES' to 'd' above, please confirm the original design weight of the vehicle before the conversion ►</i> <input style="width: 100px;" type="text"/> kgs	
e. adapted for a person with a disability?	YES <input type="checkbox"/> NO <input type="checkbox"/>
f. manufactured on or after 1 <sup>st</sup> October 2003?	YES <input type="checkbox"/> NO <input type="checkbox"/>
<i>Please note : if you have ticked 'YES' to both 'd' &amp; 'e' above, please confirm the design weight of the vehicle ►</i> <input style="width: 100px;" type="text"/> kgs	
<i>In addition, if 'YES' to both 'd' and 'f', does the vehicle also have a seat reference point (of the lowest front seat) of more than 700mm above the ground? ►</i> YES <input type="checkbox"/> NO <input type="checkbox"/>	

<b>7. DOCUMENT CHECKLIST</b>	Please tick/complete the relevant boxes below to indicate what you have enclosed with your application ▼
<b>Note: For assessment purposes a certified copy of the evidence of compliance will be acceptable in most cases (however, we may require originals in some cases).</b>	
<b><u>YOU MUST PRODUCE THE ORIGINALS AT THE TIME OF TEST</u></b>	
<b>P – Personal Import :</b> Please supply <b>certified copies</b> of the documents below <b>relating to the country of export</b> , which <b>must</b> be signed by the vehicle owner. Please refer to the <b>Guidance Notes</b> for details on this category.	
Either – <b>copy</b> of Customs & Excise 388 (C&E388) <input type="checkbox"/>	Or a <b>copy</b> of the Vehicle Registration <input type="checkbox"/>
And a <b>copy</b> of the Insurance Certificate <input type="checkbox"/>	And <b>copies</b> of utility bills/bank statements etc <input type="checkbox"/>
Other (please state using box overleaf) <input type="checkbox"/>	

Continued overleaf ►

**7. DOCUMENT CHECKLIST CONTINUED...**

Please tick/complete the relevant boxes below to indicate what you have enclosed ▼

Other Personal Import documents enclosed :

**T & M – Armoured Vehicle & Hearse, Motor Ambulance or Motor Caravan :** Please refer to the Guidance Notes for more information on these categories and state any enclosed documents below ▼**A – Amateur Built :** Please refer to the Guidance Notes for further information on this category and state any enclosed documents below ▼ (**NOTE :** You will also need to complete and return an **AMATEUR BUILT DECLARATION** with this application).

Evidence of build e.g. photographs / invoices / receipts / other (please state) :

**L – A Vehicle manufactured in very low volume :** Please refer to the Guidance Notes for further information on this category and state any enclosed documents below ▼

Evidence of build volume :

**R – A vehicle not meeting any other category :** Please refer to the Guidance Notes for this category and confirm any enclosed documents below (please tick)▼Japanese Export/  
De-registration  
certificate Manufacturer's  
letter of  
Compliance Certificate of  
Conformity National Type  
Approval  
certificate Other  
(state below) 

Other documents enclosed :

**8. DATA PROTECTION, DECLARATION AND SIGNATURE****DATA PROTECTION** – The personal information you provide on this form will be used for the purposes of VOSA's statutory functions. It will not be disclosed to other organisations unless required or permitted by law. For further information, visit the Information Charter available from VOSA's website : [www.dft.gov.uk/vosa](http://www.dft.gov.uk/vosa).**DECLARATION** – I confirm that, as far as I know, all statements in this application are true. If this application is for a **PERSONAL IMPORT**, the vehicle is for my personal or household use in the United Kingdom. I agree to use the Model Report procedure on the conditions that apply to the compliance check arrangements described in the Guidance Notes of this form.

Signature : \_\_\_\_\_ Date : \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Print Full Name : \_\_\_\_\_

Please send all fully completed application forms, supporting documents and the **correct** payment to :**APPROVAL SECTION, VOSA, ELLIPSE, PADLEY ROAD, SWANSEA, SA1 8AN**

Further information can be found on :

[www.businesslink.gov.uk/iva](http://www.businesslink.gov.uk/iva)or by contacting our **ENQUIRY LINE** on **0300 123 9000** or by email to [enquiries@vosa.gov.uk](mailto:enquiries@vosa.gov.uk).