

## Request for Replacement of Workzone Traffic Management Card

Please complete all details on this form if a replacement Workzone Traffic Management Card is required.

Please email completed form to: [DIT.TASSAdminSupport@sa.gov.au](mailto:DIT.TASSAdminSupport@sa.gov.au)

<b>Full Name:</b>		
<b>Date of Birth:</b>		
<b>Mailing Address:</b>		
	<b>Suburb:</b>	<b>Postcode:</b>
<b>Contact Phone Number:</b>		
<b>Workzone Card Number:</b>		
<b>Name of RTO (where training completed)</b>		
<b>DECLARATION</b>		
<p>I ..... (print name) solemnly and sincerely declare that the Workzone Traffic Management Card previously issued to me is not in my possession and has been:</p> <p><input type="checkbox"/> Lost                      <input type="checkbox"/> Destroyed                      <input type="checkbox"/> Stolen                      <input type="checkbox"/> Never received</p> <p>Signature ..... Date: .....</p>		
<b>OFFICE USE ONLY</b>		
<p><b>Details verified:</b></p> <p>Name: <input type="checkbox"/></p> <p>DOB: <input type="checkbox"/></p> <p>WZTM Card Number <input type="checkbox"/></p> <p>Postal Address <input type="checkbox"/></p> <p>Verification checks completed by: .....</p> <p>Replacement card order by: ..... On (date) .....</p> <p>WZTM database updated: <input type="checkbox"/></p>		