



Livestock & Rural Transporters Association of Victoria
PO Box 73, Koroit, Victoria, 3282
Email: secretariat@lrtav.com.au
Ph 0400 933 713
ABN 81 058 179 907

LRTAV Membership 2022/2023

Please complete and return to the LRTAV office at your earliest convenience
A tax invoice will be issued upon receipt of this form

Contact Details

Transport Services *Please tick* Livestock Wool Hay Fuel Fertilizer Grain Water Other

Business Name

Contact Person

Postal Address

Phone Business Fax

Mobile

Email

National Sponsorship support comes through the ALTA. This is linked to a commission scheme and this information will assist us to ensure your commission flows through to the LRTAV

Do you hold a BP Fuel Account? Yes / No
Please provide your account no.

Do you hold a Beaufort Account? Yes / No
Please provide your customer no.

Are you insured with NTI? Yes / No
Please provide your customer no.

Truck Supplier

Engine supplier

Phone Carrier & No of Phones

Type of Membership

| | | |
|---------------------------------------|----------|----|
| First B-Double/Semi (Truck & Trailer) | \$300.00 | \$ |
|---------------------------------------|----------|----|

| | | |
|-------------------------------|----------|----|
| Each B-Double/Semi thereafter | \$175.00 | \$ |
|-------------------------------|----------|----|

| | | |
|------------------------------|--|-----------|
| Total B-D & Semis | | \$ |
|------------------------------|--|-----------|

| | | |
|------------------|----------|----|
| First Tray Truck | \$175.00 | \$ |
|------------------|----------|----|

| | | |
|----------------------|---------|----|
| Each Tray thereafter | \$75.00 | \$ |
|----------------------|---------|----|

| | | |
|--------------------|--|-----------|
| Total Trays | | \$ |
|--------------------|--|-----------|

| | | |
|---------------------|--|-----------|
| Total Trucks | | \$ |
|---------------------|--|-----------|

| | | |
|-------------------------|----------|----|
| OR Affiliate Membership | \$140.00 | \$ |
|-------------------------|----------|----|

| | | |
|---------------------------|---------|----|
| OR Driver Only Membership | \$50.00 | \$ |
|---------------------------|---------|----|

Payment Options

CREDIT CARD: \$

Card No.

Exp Date: / CCV:

Signature:

EFT: Account Name: LRTAV BSB: 033 070 A/c No: 199 415

CHEQUE: Complete this form and return with cheque payable to
LRTAV, to PO Box 73, Koroit, Vic, 3282

| | |
|--|----------|
| Do you wish to receive LRTAV Newsletters/Updates? | Yes / No |
|--|----------|

| | |
|--|----------|
| Do you wish to be advised of important matters via SMS? | Yes / No |
|--|----------|