

**Department of Customs and Inland Revenue**

Taxpayer Services

Private Mail Bag 9012, Port Vila, Vanuatu

Telephone: (678) 33090 / 33091 or VoIP 2317

Email: [irtps@vanuatu.gov.vu](mailto:irtps@vanuatu.gov.vu)

Website: <https://customsinlandrevenue.gov.vu>



V A N U A T U

**CUSTOMS & INLAND REVENUE**

**SERVICE DE LA DOUANE ET DES**

**CONTRIBUTIONS INDIRECTES**

TO: The Director of Customs and Inland Revenue

NO:

FIRST REGISTRATION OF A MOTOR VEHICLE

TIN: \_\_\_\_\_

1. Name of Owner: \_\_\_\_\_ Date of birth: \_\_\_\_\_

2. Address of Owner: \_\_\_\_\_ Telephone no: \_\_\_\_\_

3. Vehicle Make: \_\_\_\_\_

4. Date of Manufacture: \_\_\_\_\_

5. Type of Vehicle: \_\_\_\_\_

6. Method of Propulsion: \_\_\_\_\_

7. Color: \_\_\_\_\_

8. Chassis Number: \_\_\_\_\_

9. Engine Number: \_\_\_\_\_

10. Horse Power [Engine Capacity]: \_\_\_\_\_

11. Number of Cylinders: \_\_\_\_\_

12. Weight: : (a) Unladen: \_\_\_\_\_

: (b) Laden: \_\_\_\_\_

13. Maximum Authorized Number of Passengers (Including Driver): \_\_\_\_\_

14. Date of Import: \_\_\_\_\_

15. Date of Purchase: \_\_\_\_\_

16. Statistical Value as per Customs SAD Form: Vatu: \_\_\_\_\_

(Please attached copy of Customs SAD Form entry)

17. Actual Retail Price Paid for the Vehicle: Vatu: \_\_\_\_\_

Date: ...../...../..20.....

Signature of Vendor/Auto Dealer:.....

I certify that the above particulars are true and correct.

Official use only:

Registration fee	<input type="text"/>
Road Tax Fee Paid	<input type="text"/>
Total	<input type="text"/>

Receipt No	<input type="text"/>
Receipt Date	<input type="text"/>
Sticker No	<input type="text"/>