Land Transport Authority

10 Sin Ming Drive Singapore 575701
www.lta.gov.sg

AUTOPASS CARD APPLICATION FORM

Section A – To be filled by applicant

*Please select appropriate description.

Vehicle Registration No. _____ Insurance Expiry Date^ DD / MM / YYYY

^With 3rd party coverage

Vehicle Type* ☐ Motorcycle ☐ Car ☐ Taxi ☐ Bus ☐ Light Goods Vehicle ☐ Heavy Goods Vehicle

Vehicle Make & Model _____

Vehicle Insurance Company _____

Name of Owner _____

Owner's IC / Passport No. / Business Reg. No. _____ Contact No. _____

Name of Applicant# _____

#Please fill in if different from owner

Applicant's IC / Passport No. _____ Contact No. _____

Applicant's Address _____

Email Address _____

Nationality* ☐ Malaysian ☐ Others _____

Immigration Status* ☐ Work Pass ☐ Social Visit Pass ☐ Others (Pls specify): _____

I acknowledge and declare that:

(i) the information I have provided to LTA is true and accurate to the best of my knowledge and belief;
(ii) I may be liable to be penalised for an offence under Section 129 of the Road Traffic Act if I have made any false or misleading declarations; and
(iii) I am subject to, legally bound by and must comply with the Autopass Additional Terms, whichever of the following that is applicable:
   a. Terms and Conditions Governing the Application for and Grant of an ASEAN Goods Vehicle Permit and Autopass Card;
   b. Terms and Conditions Governing the Application for and Grant of an ASEAN Public Service Vehicle Permit and Autopass Card; and
   c. Terms and Conditions Governing the use of the Vehicle Entry Permit and Autopass Card,

   and any amendments thereto from time to time.

_____ Signature of Applicant

_____ Date

Section B – For official use

Autopass Card No.: (16-Digit CAN No.) | | | | | - | | | | | - | | | | | - | | | | | |

Issued By: _____ Date: _____