

Mass Distance Charges Assessment Form		Road Fund Administration Private Bag 13372 Windhoek Tel: +264 61 378 950 Fax: +264 61 378 978 e-mail: info@rfanam.com.na
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Assessment Form	
Log sheets	
Proof of Payment	

NaTIS Official Signature

RFA Account Number:

1. Operator Particulars

Name																									
Postal Address																									
ID Number																									
Telephone																									
Fax																									
Mobile																									
E-mail																									

2. Business Particulars *(if different from above)*

Name of Business																									
Business Registration																									
Postal Address																									
Telephone																									
Fax																									
E-mail																									

3. Calculation of MDC payable

Note that there are severe penalties for false declarations.

Period: Month:___ Year:___ to Month:___ Year:___

MDC Due/Payable N\$.....

I certify that the particulars in this assessment are correct.

.....
Name
Operator Signature
Date

-----tear off here-----tear off here-----tear off here-----tear off here-----



Receipt MDC Assessment

This certifies that the MDC Assessment for the abovementioned vehicle has been submitted with all the supporting documents.

Period: Month:___ Year:___ to Month:___ Year:___

RFA Account Number.....

NaTIS Official Signature