Mass Distance Charges Assessment Form



Road Fund Administration

Private Bag 13372, Windhoek Tel: +264 61 433 3000 Fax: +264 61 433 3070 website:www.rfanam.com

	Assessment Form		MDC Reference Number: Email Addresses:					
Official	Log sheets		Mdcassessmentqueries@rfanam.com.na					
Stamp	Proof of Payment		PreAssessmentcalculations@rfanam.com.na Logbookrequests@rfanam.com.na					
	Picture of current km	Official Signature	Coprequests@rfanam.com.na Coprequests@rfanam.com.na Mdcaccountrecons@rfanam.com.na					
			Midcaccountrecons@rtanam.com.na					

1. Operator Particulars

Name														
Postal Address														
ID Number														
Telephone														
Fax														
Mobile														
E-mail														

2. Business Particulars (if different from above)

Name														
Postal Address					7									
Business Reg. No.														
Telephone														
Fax														
Mobile														
E-mail														

Coloulati h

Note that there are se	DC payable evere penalties for false declarations	4. CC	DP Request collect e-mail
Period: Month:	_Year: to Month:	_Year: NOT	E: That the COP is only valid for one month and issued only upon request.
IDC Due/Payable	N\$		A COP is only issued for the current
certify that the particu	lars in this assessment are correct.		assessment period.
Nan	 ne	Operator Signature	Date
Nan		Operator Signature	Date
Nar		DLLECTION RECEIPT	Date

Amount Paid: N\$

Operator/Business

5. Vehicle Identification Data

	Vehicle Licence Number	Vehicle Register Number	End Odometre Reading	Total Km travelled on Namibian Proclaimed Roads	Rate (N\$/km)	Total Paid N\$
1		н				
2		Н				
3		Н				
4		Н				
5		Н				
6		Н				
7		Н				
8		Н				
9		Н				
10		Н				
11		Н				
12		Н				
13		Н				
14		Н				
15		Н				

NB: For additional vehicles, please attach list of vehicles reflecting the same information as above.

Mass Distance Charges Explanatory Notes



Road Fund Administration Private Bag 13372, Windhoek Tel: +264 61 433 3000 Fax: +264 61 433 3070 e-mail: Mdcassessmentqueries@rfanam.com.na

Solitaire Press #15468

MDC Assessment Form

- 1. The RFA Account Number allocated to the operator by the RFA should be reflected on this form.
- 2. The summarised total MDC payment liable should be entered under "3. Calculation of MDC payable", the period for which the payment is being effected should correspond with that allocated to the operator by the RFA.
- For administrative reasons, one form should be completed for vehicles for which the payment interval is the same.
 E.g. Vehicles for which the payment interval is bi-annually should be submitted on the same assessment form.
 Vehicles for which the payment interval is quarterly should be submitted on the same assessment form etc.
- 4. The tear off section will serve as confirmation of submission of the self-assessed MDC charge, and shall be completed by a RFA official upon submission.
- 5. The vehicle licence number and vehicle register number are required for correct identification purposes.

Sample Vehicle Licence Number: **N18984W** Sample Vehicle Register Number: **RBR34H**

BANK DETAILS

ROAD FUND ADMINISTRATION-MDC

Standard Bank Namibia

Branch name:	Windhoek Branch
Branch Code:	08 2372 00
Account Number:	04 142 4360
Swift Address:	SBNMNANX