HP FORM XI L.CON. AR

(Section		Vehicles Act, 1988 and Rule 24 of the or Vehicle Rules, 1999).
FORM O	F APPLICATION FOR RENE	WAL OF A CONDUCTOR LICENCES
	(To be filled in by	a Medical Officer)
1. Name of pe	erson examined	
2. Father's Na	ume	
3. Permanent	address	
6. Valid Up to		
7. Issued by _		
8. Fee paid fo	r renewal vice cash/receipt/tre	easury challan No./Date
9. Badge No.		
10. I am not d	isqualified for holding a condu	ictor's Licence.
	Verified and renewed	(Signature or thumb impression of applicant)
	Upto	
	Licensing Authority	_(Station)
No		Dated

Copy is forwarded to the Licensing Authority (Motor Vehicle) for information. It is requested that the records of his office with regard to the issue of Conductor's Licence to the above name applicant may be transferred to this office.

Licensing Authority

(This information is required to be sent if the licence is renewed by any authority other than the authority which had issued the licence).