## FORM 4 [See Rule 14] FORM OF APPLICATION FOR LICENCE TO DRIVE A MOTOR VEHICLE

То

The Licensing Authority,

Space for Passport size photograph.

I apply for a license to enable me to drive vehicle of the following description:

- a. Motor cycle without gear
- b. Motor cycle with gear
- c. Invalid carriage
- d. Light motor vehicle
- e. Medium goods vehicle
- f. Medium passenger motor vehicle
- g. Heavy goods vehicle
- h. Heavy passenger motor vehicle
- i. Road roller
- j. Motor vehicle of following description:

.....

## PARTICULARS TO BE FURNISHED BY THE APPLICANT

1.	Full Name	·
2.	Son/Wife/daughter of	·
3.	Permanent address	·
	(Proof to be enclosed)	
4.	Temporary address	•
	Official address (if any)	
5.	Date of birth (Proof of age to be	
	enclosed	:
6.	Education Qualification	·
7.	Identification mark(s)	1
		2
8.	Blood Group RH factor (Optional)	•
9.	Have you previously held driving license?	
	If so, give details.	:
10.	Particulars and date of every conviction	
	which has been ordered to be enclosed	
	on any license held by the applicant	·
11.	Have you been disqualified for obtaining a	

as to your fitness or ability to drive a in respect of which a license to drive	test vehicle is		
Date of test	Testing authority	Result of test	
I enclose three copies of my recent passport size photograph (Where laminated card is used no photograph is required.			
I enclose the learner's license Nodateddated by licensing authority.			
I enclose the driving certificate Nodateddated			
I have submitted along with my application for learner's license the written consent of parent/guardian.			
I have submitted along with the application for learner's license/ I enclose the medical fitness certificate.			
I am exempted from the medical test under Rule 6 of the Central Motor Vehicles Rule, 19899.			
I am exempted from preliminary test under Rule 11(2) of the Central Motor Vehicles Rule, 1989.			
I have paid the fee of Rs.			
I hereby declare that to the best of my knowledge and belief the particulars given above are true.			
* Strike out whichever is inapplicable	e.		
	Signature/Thun Applica	nb Impression of	
	<ul> <li>Have you been subjected to a driving as to your fitness or ability to drive a in respect of which a license to drive applied for? If so, give the following <i>Date of test</i></li> <li>I enclose three copies of my recent card is used no photograph is require.</li> <li>I enclose the learner's license No by licensing authority.</li> <li>I enclose the driving certificate No issued by</li> <li>I have submitted along with my a consent of parent/guardian.</li> <li>I have submitted along with the ap medical fitness certificate.</li> <li>I am exempted from the medical test Rule, 19899.</li> <li>I have paid the fee of Rs</li> <li>I hereby declare that to the best of m above are true.</li> <li>* Strike out whichever is inapplicable</li> </ul>	Have you been subjected to a driving test as to your fitness or ability to drive a vehicle in respect of which a license to drive is applied for? If so, give the following details :	

## CERTIFICATE OF TEST OF COMPETENCE TO DRIVE

The applicant has passed the test prescribed under Rule 15 of the Central Motor Vehicles Rule, 1989. The test was conducted on ...... on dated.....

The applicant has failed in the test.

(The Details of the deficiency to be listed)

Date.....

Signature of Testing Authority

Full name and designation

Two specimen signatures of Applicant:

1.

2.

\* Strike out whichever is inapplicable.