

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

To

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 | <input type="checkbox"/> |
| b. Motor cycle with gear | <input type="checkbox"/> |
| c. Invalid carriage | <input type="checkbox"/> |
| d. Light motor vehicle | <input type="checkbox"/> |
| e. Medium goods vehicle | <input type="checkbox"/> |
| f. Medium passenger motor vehicle | <input type="checkbox"/> |
| g. Heavy goods vehicle | <input type="checkbox"/> |
| h. Heavy passenger motor vehicle | <input type="checkbox"/> |
| i. Road roller | <input type="checkbox"/> |
| j. Motor vehicle of following description: | |

PARTICULARS TO BE FURNISHED BY THE APPLICANT

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

- license to drive? If so, for what reasons
12. 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

	<i>Date of test</i>	<i>Testing authority</i>	<i>Result of test</i>
1.			
2.			
3.			
4.			

13. I enclose three copies of my recent passport size photograph (Where laminated card is used no photograph is required.)
14. I enclose the learner's license No. dated issued by licensing authority.
15. I enclose the driving certificate No. dated issued by
16. I have submitted along with my application for learner's license the written consent of parent/guardian.
17. I have submitted along with the application for learner's license/ I enclose the medical fitness certificate.
18. I am exempted from the medical test under Rule 6 of the Central Motor Vehicles Rule, 1989.
19. I am exempted from preliminary test under Rule 11(2) of the Central Motor Vehicles Rule, 1989.
20. 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.

Date.

Signature/Thumb Impression of Applicant

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 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.