APPLICATION FORM FOR THE GRANT OR RENEWAL OF LEARNER'S Licence

FORM-2(See rule - 10)

	appropriate box)	uuuu			. 101 1110 101	lowing motor vehic		
. Mc	otor cycle below 5	0сс						
Мо	otor cycle above 5	0cc Light	t Motor Vehicle	(includ	des Cars &	Jeeps) Transpo	rt Vehicle R	oad Roller
Invali	d carriage (<i>incas</i> e	of physical	ly handicapped	applic	cants)			
. An	y other category				(Specify	the category in the box)		
,		(Please fill	the following p	articu	lars in CAP	ITAL Letters only)		
. FULL	NAME(Leave one	space betw	een first and las	st nam	re)			
. Son/D	aughter/Wife of							
1.	SEX	MALE FEMALE						
	ADDRESS		PERMANE	NT			TEMPORARY	
	Door No.							
	Village/town/city							
	Mandal							
	District							
	Pincode							
	DATE OF BIRTH		DD		мм		YYYY	
	EDUCATIONAL (QUALIFICAT	ION					
	IDENTIFICATION	I MARKS		_				
				1.				
	(Optional) :	: BLOOD GF	ROUP & Rh FAC	2. TOR				
	Disclaimer : The declaration of the	applicant is e Blood gro	solely responsi	ible fo	r any medic	cal complications t	hat may arise	due to wro
2.	Effective driving	Licence to	drive the followi	ng cla	ss of vehic	les held by the app	licant.(Tick in	the approp
	box).							
Α	B C D E	F					G	
			DD	ММ			YYYY	

		rners Licence? If so, f							
	Applicant's Declaration								
Issued	by doctor	s certificate dated							
Guardi	an (In the case of	applicant being a Min	or) I enclose drivi	ng cerificate dated	the written consent of Parent				
l have	paid the fee of Rs	Issued by 							
l am ex	empted from the	medical test under rul	e 6 of Central Mot	or Vehicle rules 198	89.				
4. I am ex	empted from the	preliminary test under	rule 11(2) of Cen	tral Motor Vehicle r	ules 1989.				
DATE	:								
*Strike	out whichever is	inapplicable		Specimen Signature of Applicant					
	Declara	ation under sub-section (By the guardian in							
ri/Kumari									
on/Daugnte	r								
ccept respo f the Licence Name a	nsibility for his/he e. I give my conse and full address o	and i accept responsiler driving. I shall intiment for his/her obtaining	ate the Licencing	Authority in writing ce.					
Parent Relatio	/Guardian onship								
(To be signe	ed in the presence	e of the Licencing Aut	hority or person a	uthorised in this be	ehalf by Licencing Authority)				
OR OFFICE	USE:								
KEMPTED fi	rom test under ru	le 6 & under rule 11(2)	of CMV rules	YES	NO				
EST under r	ule 11(1) of CMV	rules							
esult :	PASSAD	FAILED	ABSENT						
ecision	ISSUE	REFUSE							
easons of R	efusal:								
1									
2									
ATE									
ATE					CODE				

Signature of Licencing Authority