## FORM - 4 (See rule 14) Form of application for Licence to drive a Motor Vehicle

To, T	he Licensing Authority					
 			Space for Photograph of the size five centimeters by six centimeters			
I ap	I apply for a licence to enable me to drive vehicles of the following description :					
(a) (b) (c) (d) (e) (f) (g) (h) (i) (j)	Motor cycle without gear Motor cycle with gear Invalid carriage Light motor vehicle Medium goods vehicle Medium passenger motor vehicle Heavy goods vehicle Heavy passenger motor vehicle Road roller Motor vehicle of the following description					
Particulars to be furnished by the Applicant						
11.	Name Son/Wife/daughter of Permanent address (proof to be enclosed) Temporary address Official Address (if any) Date of birth (proof to be enclosed) Educational Qualification Identification Marks (1) (2) Blood Group and RH factor Have you previously held driving licence? If so, give details Particulars and date of every conviction which has been ordered to be endorsed on any licence held by the applicant. Have you been disqualified for obtaining a licence to drive? If so for what reason? Have you been subjected to a driving test as to your fitness or ability to drive a vehicle in respect of which a licence to drive is applied for? If so, give the following details:					
	Date of Test Testi	ng Authority	Result of test			
	1.					
	2.					
	3. 4.					
	<del>4</del> .					

13.	I enclose three copies of my recent photograph (where laminated card is used no phototograph		nto six centimeters		
14.	I enclose the Learner's licence Nothe Licensing Authority.	date	issued by		
15.	I enclose the Driving Certificate No	date	issued by		
16.	I have submitted alongwith my application parent/guardian.	n for Learner's Licence the v	written consent of		
17.	I have submitted alongwith the application for Learner's Licence/I enclose the medical fitnes certificate.				
18.	I am exempted from the medical test under rule	e 6 of the central motor vehicles	Rules, 1989.		
19.	I am exempted from preliminary test under rule 11 (2) of the Central Motor Vehicles Rules, 1989.				
20.					
	I hereby declare that to the best of my knowledge	edge and belief the particulars gi	ve above are true.		
NOT	E : Strike out whichever is in applicable.				
Date	d :	Signature/Thumb impi	ression of applicant		
	Certificate of test of c	competence to drive.			
1989	The applicant has passed the test prescribed. The test was conducted on (here enter the on (date)				
	The applicant has failed in the test. ( The det	ails of the deficiency to be listed	out )		
Date	:	Signature of testir (Full name and d			
	Two specimen signature of applicant				
	Strike out whichever is inapplicable.				
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