APPLICATION FORM FOR LICENCE TO DRIVE A MOTOR VEHICLE FORM - 4 (See rule - 14)

The Licencing Authority,						
I enclosed Learners Licence No		Dt	Issued by L.A			
	_	ve the following vehicles	(Tick at the appropriate box)			
A)	Motor cycle below 50cc					
В)	Motor cycle above 50cc					
C) <u></u>	Light Motor Vehicle (inc	ludes Cars & Jeeps)				
D) <u></u>	Transport Vehicle					
E)	Road Roller					
F)	Invalid Carriage (incase of physically handicapped applicants)					
G) 🗌	Any Other Category		(Specify the category in the box)			
4 FULL NAME (L	(Please fill the f	following particulars in CAPITA	AL Letters only)			
1. FULL NAME (Leave one Space between first and last name)						
2. Son/Daughter/Wife	of					
3. SEX	MALE		FEMALE			
4. ADDRESS	PERM	ANENT	TEMPORARY			
Door No.						
Village/town/city		1				
Ç ,						
Mandal						
District						
Pincode						
5. DATE OF BIRTH	DD DD	ММ	THE YYYY			
6. EDUCATIONAL QUA	LIFICATION					
7.IDENTIFICATION MARKS 1						
		2				
8. (Optional) : BLOOD (GROUP & Rh FACTOR					
Disclaimer : The applicant is s	olely responsible for any medi	cal complications that may ari	ise due to wrong declaration of the Blood group.			
9. Particulars and date any licence held by the		ich has been ordered to	o be endorsed on			

10. Particulars of disqualification of the applicant from obtaining a licence to drive, and reasons for it.

Applicant's declaration							
	enclose the Driving Certificate No Dassued by	ated					
13.	I have submitted along with my application for learner's licence the consent of parent/guardian	written Yes		No 🗌			
14.	I have submitted along with the application for learner's licence/I e medical fitness certificate	nclose the Yes		No 🗌			
15.	I am exempted from the medical test under Rule 6 of the Central N Vehicle Rules 1989	/lotor Yes		No 🗌			
16.	I am exempted from primary test under rule 11(2) of the Central M Rules 1989	otor Vehicle Yes	Section	No 🗌			
	I hereby declare that to the best of my knowledge and belief the pagiven above are true.	articulars Yes		No 🗌			
Note	:Strike out whichever is inapplicable.						
			Signatur	re/Thumb Impression			
				of applicant			
	CERTIFICATE OF TEST OF C	OMPETENC	Ε				
	test was conducted on vehicle with Reg.Noapplicant has passed the test prescribed under rule 15 of the CMV rule.			-			
Resu	ult of the Test: Passed Failed Failed		Absent				
If fai	led Reasons for failure						

Name of Testing Autority

Code

Signature of the Testing Authority