FORM OF APPLICATION FOR LICENSE TO DRIVE A MOTOR VEHICLE (See Rule - 14 of MV Act-1983) FORM - 4

То

The Licensing Authority

, Arun	achal Pradesh						
I apply for a license to enable me to drive Vehicle of the following description as paid employee/PRIVATE/Public							
○ Service vehicle/○Goods vehicl	le .						
a). Motor cycle/Scooter (Without G	ear) ()						
b). Motor cycle/Scooter (With Gear) ()						
c). Invalid Carriage	\bigcirc						
d). Light Motor Vehicle	\bigcirc						
e). Medium Goods Vehicle	\bigcirc						
f). Medium Passenger Motor Vehicl	le 🔿						
g). Heavy Goods Vehicle	\bigcirc						
h). Heavy Passenger Motor Vehicle	\bigcirc						
i). Road Roller.	\bigcirc						
PARTICULARS TO BE FURNISHED BY THE APPLICANT							
1. Name in full (In block letter)							
2. C Father's / Mother's/ Cuardian's/ Husband name							
3. Permanent Address							
4. Present Address							
5. O Temporary address/O Official address (If any)							
6. Date of birth							

7. Educational Qualification							
8. Identification marks							
9. Blood Group and (RH Factor)							
10. Have you previously held driving license, if so, give details : \bigcirc Yes \bigcirc No							
11. Particulars and date of every eviction which has been ordered to be endorsed on any license held by the applicant.							
]			
12. Have you been subjected to a driving	test to your fitness or	ability to di	rive a vehicle in] 1 resp	ect of w	which a license to	
drive is applied for if so give the followin	g details date of test			testi	ing auth	ority	
		result of to					
13. I enclose three copies of my recent photograph of the size five centimeters into six centimeters (where laminated card is used to photograph are required.)							
14. Have you been disqualified for obtaining a license drive ? if so for what reason : \bigcirc Yes \bigcirc No							
15. I enclose the driving license No.						issued by the	
				lated			
16. I enclose the driving certificate No.					dated		

17. I have submitted along with my application for learner's I enclose the	0 0
18. I have submitted along with my application for learner's I enclose the	e medical fitness certificate. \bigcirc Yes \bigcirc No
19. I am exempted from the medical test under rule 4 of the Central motor	or vehicle Rule - 1989. \bigcirc Yes \bigcirc No
20. I am exempted from the medical test under rule 11(2) of the Central	motor vehicle Rule-1989. \bigcirc Yes \bigcirc No
21. I have paid the fee Rupees /-	
I hereby declare the best of my knowledge	and belief the the particulars given above are true.
NOTE :- Strike out whichever is inapplicable.	
Place :-	
Date :-	
	Signature/Thumb impression of Applicant
CERTIFIED OF TEST COMPETENC	CE TO DRIVE
1. The applicant has passed the test prescribed under rule 15 of the centra	al motor vehicle Rules,1989 the test was conducted
on for Scooter/Motor Cycle/LMV/HMV/MM	MV/PSV.
2. The applicant has failed in the test.	
Date :-	
Two specimen Signature of Applicant :- 1)	
2)	