

FORM 2
FORM OF APPLICATION FOR THE GRANT OR
RENEWAL OF LEARNER'S LICENCE.

To:

The Licensing Authority,
..... ,
.....

I hereby apply for a license authorizing me to drive as a learner's of the following motor vehicles.

- a) Motor Cycle without Gear.
- b) Motor cycle with Gear.
- c) Invalid Carriage.
- d) Light Motor Vehicle
- e) Transport Vehicle
- f) Road Roller.
- g) Motor Vehicle of the following description.
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PARTICULARS TO BE FURNISHED BY THE APPLICANT

- 1) Name :
- 2) Son/Wife/Daughter of :
- 3) Permanent Address :
(proof to be enclosed)
- 4) Temporary address/ :
official address (if any)
- 5) Date of Birth :
(Proof to be enclosed)
- 6) Educational Qualification :
- 7) Identification Marks :
- 8) Blood Group & RH factor :
- 9) I hold an effective driving license to :
drive (a) Motor Cycle/Light /Medium
passenger M.V. Medium goods vehicle
with effect from:
- 10) Particulars of any driving license :
previously held by applicant. Whether

it was cancelled and if so, for what reason ?

- 11) Particulars of any learner's license previously :
held by applicant in respect of the description
of vehicle to which the applicant has applied.
- 12) Have you been disqualified for holding or :
obtaining a driving license or learners license ?
If so, what reasons ?
- 13) I enclose 3 copies of my recent photograph
(passport size photograph).
- 14) I enclose medical certificate : Dated:
Issued by (doctor)
- 15) I have submitted along with my earlier application for :
Learner's license/I enclose the written consent of my
Parent/Guardian (in case the applicant being minor).
- 16) I enclose driving certificate dated.....
issued by (name address of the driving school).
- 17) I have paid the fee of : Rs.
- 18) I am exempted from the medical test under :
rule 6 of Central Motor Vehicle Rule,1989.
- 19) I am exempted from the preliminary test under :
rule 11(2) of Central Motor vehicle Rule,1989.

.....
.....

- **strike out whichever is not applicable**

Date:

Signature or thumb impression of the
applicant

Specimen Signature or thumb impression
of the applicant.

1)

2)

Declaration under sub-section (2) of Section 7 of the Motor Vehicle Act, 1988

Sri/Kumari Son/daughter of
..... who is a minor is under my care and I accept
responsibility for his/her driving. If at a later date I decide not to accept responsibility for
his/her driving. I shall intimate the Licensing Authority in writing for the cancellation of the
licence. I give my consent for his/her obtaining Learner's Licence.

Signature

Name and full address of the Parent/guardian

Relationship

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(To be signed in the presence of the licensing authority or person authorized in this behalf by
the licensing authority).

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For Office Use

The applicant is exempted from the medical test under Rule 6 and preliminary test under
Rule 11(2) of CMV Rules, 1989.

Learner's licence may be issued.

The applicant was tested with reference to Rule 11(1) of CMV Rules, 1989. He has passed
the test. Learner's licence may be issued.

He has failed in the test. (Reasons should be specified).

Learner's licence may be refused.

Signature of Licensing Authority
or other person authorized in this behalf.

*** strike out whichever is not applicable.**