

BOOKING INFORMATION

The preferred date and time as indicated by you is herewith reserved.

APPLICANT INFORMATION

Surname **MAKAMU**
Initials ******
Identification Type **RSA ID document**
Identification Number **980*****080**

BOOKING INFORMATION

Reference Number **483000005WBM**
Date and Time **2024-01-10 09:00**
License Code **MOTOR VEHICLE (EXCLUDING MC)**
Centre **TEMBISA DLTC**
Test Type **LEARNERS LICENCE TEST**
Expiry Date **2024-01-09**
Application Fee **R108,00**

DLTC ADDRESS

45 LINK ROAD

TEMBISA
TEMBISA
1632

NOTE:

Take the following with you:

- (i) Please bring your Identity Document as well as a photocopy thereof.
- (ii) Minimum of two identical ID photographs.

Be mindful of the following:

- (i) Please note that an Eye Test report is optional. The DLTC can also perform an Eye Test as required in terms of the Road Traffic Act.
- (ii) It is highly recommended that you arrive at the stipulated time before your appointment.
- (iii) Stipulated time before your appointment: 1 hour
- (iv) Please note that an additional fee will be required for the issuing of the LL in the event that you have met the minimum requirements to pass.

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