

# DRIVER LICENSE CHECK FORM

Driver Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

License Number: \_\_\_\_\_

License Class: \_\_\_\_\_

Issue Date: \_\_\_\_\_

Expiry Date: \_\_\_\_\_

Issuing Authority: \_\_\_\_\_

## ENDORSEMENTS:

☐ Clean License

☐ Minor Endorsements

☐ Major Endorsements

## VERIFICATION CHECKLIST:

☐ Physical license inspected

☐ DVLA check completed

☐ Photo ID verified

☐ Address confirmed

Checked by: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_