FORM 4 [See Rule 1

FORM OF APPLICATION FOR LICENCE TO DRIVE A MOTOR VEHICLE

To, THE LICENSING AUTHORITY, सहारनपुर	
I apply for a licence to enable me to enable me to drive vel Of the following description:-	
 (a) Motor Cycle without gear. (b) Motor Cycle with gear. (c) Invalid Carriage . (d) Light Motor Vehicle (e) Medium Goods Vehicle (f) Medium Passenger Motor Vehicle (g) Heavy Goods Vehicle (h) Heavy Passenger Motor Vehicle (i) Road Roller 	Passport Size photograph Of the applicant
Q) Motor Vehicle of the following description	
Particulars to be furni	shed by the applicant
 Full name Son/ wife/ daughter of Permanent address (Proof to be enclosed) Temporary address/ Official address (if any) Date of birth (Proof to be enclosed) Educational qualification Identification mark Blood Group with Rh factor (optional) Have you previously held driving licence? if so, give details. Particulars and date of every conviction which has been ordered to be endorsed on any licence held by the applicant. Have you been disqualified for obtaining a licence to drive? If so, for what reason? Have you been subjected to a driving test as to your fitness or ability to drive a vehicle in respect of which a licence to drive is applied for? If so, give the following details:- 	हिरिराज चौधरी राम नारायण चौधरी गली 4, हकीकत नगर, दयाल कॉलोनी, सहारनपुर - 242242 12 - मार्च - 1996 हाई स्कूल (1) दाये गाल पर चोट का निशान (2)
Date of test Testing Author	ority Result of test
(1) (2) (3) (4)	
13. I enclose three copies of my recent passport size photograms required). हाँ 14. I enclose learner's licence number Authority सहारनपुर आर. टी. ओ.	date 22- नवम्बर -2016 issued by licesing
Authority सहरिनपुर आर. टा. आ. 15. I enclose the driving certificate number लागू नहीं issued by	dated
16. I have submitted along with my application for learner' 17. I have submitted along with my application for learner' 18. I am exempted from the medical test under rule 6 of the	s licence. I enclose the medical fitness certificate. हाँ

	19. I am exempted from t	preliminary test	under rule 11 ((2) of the central	motor vehicle rules 19	989
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20. I have paid the fee of Rs.

I hereby declare that to the best of my knowledge and belief the particulars given above are true.

*Strike out whichever is inapplicable.

Date: 10 - जनवरी - 2017

Signature / That

हरिराज

Signature / Thumb impression of applicant.

Certificate of test of competence to drive

e 15 of the Central Motor vehicle Rules, 1989. The scription of the vehicle)				
*The applicant has failed in the test.(The details of deficiency to be listed out.)				
Signature of Testing Authority				