

FORM 4
[See Rule 1]
FORM OF APPLICATION FOR LICENCE TO DRIVE A MOTOR VEHICLE

To,
THE LICENSING AUTHORITY,
Saharanpur
.....

I apply for a licence to enable me to enable me to drive vehicles
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
- Q) Motor Vehicle of the following description

Passport
Size photograph
Of the
applicant

Particulars to be furnished by the applicant

- 1. Full name Hariraj Chaudhary
- 2. Son/ wife/ daughter of Ram Narayan Chaudhary
- 3. Permanent address (Proof to be enclosed) Gali No-4, Hakikat Nagar, Dayal Colony, Saharanpur - 242242
- 4. Temporary address/ Official address (if any)
- 5. Date of birth (Proof to be enclosed) 12 - March -1996
- 6. Educational qualification High School
- 7. Identification mark
 - (1) Injury mark on right cheek
 - (2) AB +ve
- 8. Blood Group with Rh factor (optional)
- 9. Have you previously held driving licence?
if so, give details. No
- 10. Particulars and date of every conviction
which has been ordered to be endorsed on
any licence held by the applicant. Not Applicable
- 11. Have you been disqualified for obtaining
a licence to drive? If so, for what reason? No
- 12. 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 :- Not Applicable

- | Date of test | Testing Authority | Result of test |
|--------------|-------------------|----------------|
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
- 13. I enclose three copies of my recent passport size photographs (where Laminated card is used, no photographs are required). Yes
 - 14. I enclose learner's licence number ABCD123 XXL date 22- November-2016 issued by licesing Authority Saharanpur R.T.O.
 - 15. I enclose the driving certificate number Not Applicable dated _____ issued by _____
 - 16. I have submitted along with my application for learner's licence the written consent of parent / gaurdian.
 - 17. I have submitted along with my application for learner's licence. I enclose the medical fitness certificate.
 - 18. I am exempted from the medical test under rule 6 of the Central Motor Vehicle Rules , 1989.

19. I am exempted from preliminary test under rule 11 (2) of the central motor vehicle rules 1989.

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.

Hariraj Singh

Date : **10 -January- 2017**

Signature / Thumb impression of applicant.

Certificate of test of competence to drive

The applicant has passed the test prescribed under rule 15 of the Central Motor vehicle Rules, 1989. The test was conducted on (here enter the registration mark and description of the vehicle) _____

On (date) _____

*The applicant has failed in the test.(The details of deficiency to be listed out.)

Date _____

Signature of Testing Authority

Full name and designation _____

Two specimen signatures of applicant:

(1)

(2)

strike out whichever is inapplicable