Application Reference Slip

Application No : 3628071322 Name : ALAN JACOB

Application Date : 10-09-2022 Date of Birth : 01-07-2002

Blood Group: A+ Father Name: JACOB VARGHESE

Applicant Gender: Male



Services Requested	Documentary Proof Required
1. Issue of New LL Application (MCWG)	 Age Proof Eye-Test Certificate Permanent Address Proof Address Proof (Present)

Your application is submitted for processing and quote this Application Number: 3628071322 for all future reference.

An SMS has been sent to your registered mobile Number: *****4436.

Note 1: Applicant should take print out of the **Application Form (pre filled)** and duly signed with all required Documents to the concerned RTO / RLA office.

- 2: The online facility of application submission, upload documents, payment of fees, slot booking etc., does not complete the process of issue of Driving Licence or any other Service requested. The applicant has to compulsorily visit the concerned Road Transport Office to finish the process of issue of Driving Licence and/or any other associated services.
- 3: Applicants are requested to note that after completion of all stages mentioned under `Applicant Stages', the applicant has to visit the concerned Road Transport Office on the scheduled date of appointment, along with the necessary documents to complete the remaining process (or) In cases where online slot booking facility is not available for any particular RTO, the applicant has to go to the concerned Road Transport Office at the earliest along with the necessary documents, to complete the remaining process.

For any reference visit: https://sarathi.parivahan.gov.in/sarathiservice

Applicant Address:

KAKKUZHIYIL HOUSE ADIVAARAM

Perinthalmanna, Malappuram, KL

Pincode: 679322

RTO Location:

SRTO, PERINTHALMANNA

KODUVAYAKKAL BUILDING, OOTTY ROAD, NR. MOULANA HOSPITAL,PERINTHALMANNA

PinCode: 679332

Phone: 04933-220856

<u>Application Form (pre filled)</u>

Print Acknowledgement