

# FORM 2

[See rules 10, 14, 17 and 18]



575542925

Appl No:575542925 Dt:08-02-2025

Form of Application for Learner's Licence Or Driving Licence Or Addition of a New Class of Vehicle Or Renewal of Driving Licence Or Change of Address Or Name

To,

The Licencing Authority

RTO,CHHATRAPATI SAMBHAJINAGAR



Services applying for (Please Tick ✓ mark against single or multiple service, wherever applicable)	
Issue of New Learner's Licence	✓
Issue of New Driving Licence	
Addition of Class of Vehicle to Driving Licence	
Renewal of Driving Licence	
Duplicate Driving Licence	
Change / Correction of Address in Driving Licence	
Change / Correction of Name in Driving Licence	

## 1. Class of Vehicles (COV): Applicable for New Learner's Licence or New Driving Licence

Motor Cycle <b>Without Gear</b> (MCWOG)	
Motor Cycle <b>With Gear</b> (MCWG)	
Light Motor Vehicle as <b>Non Transport</b> (LMV NTV)	✓
<b>Adapted Vehicle</b> (vehicles for use by Divyang)	
Medium or Heavy Goods or Passenger Vehicle as <b>Transport Vehicle</b>	
<b>E-Rickshaw</b>	
<b>E-Cart</b>	
Others; which is not covered in any of the above categories including, Harvester, Excavator, Fork lift, Trailers, Crane mounted vehicles, Agricultural tractor and power tiller, Tow trucks, Breakdown Van and Recovery vehicles, Construction equipment vehicles	

### Explanation :-

1. Non - Transport Vehicles include Motor Cycle with or without sidecar for personal use, Mopeds, Three Wheeled vehicles for personal use, Motor Car for personal use, Fork Lift;
2. Transport vehicle includes a public service vehicle, a goods carriage, an educational institution bus or private service vehicle;
3. Light motor vehicle includes a transport vehicle or omnibus the gross vehicle weight of either of which or a motor car or tractor or road-roller the unladen weight of any of which, does not exceed 7,500 kilograms;
4. Medium goods vehicle includes any goods carriage other than a light motor vehicle or a heavy goods vehicle;
5. Heavy goods vehicle includes any goods carriage the gross vehicle weight of which, or a tractor or a roadroller the unladen weight of either of which, exceeds 12,000 kilograms.

**2. Personal details of the Applicant (in Capital Letters)**

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Details of Aadhar card, if already available with the applicant.		Aadhar Card number Not Furnished	
Details of Aadhar application number if applied.		Aadhar Card application number	
First Name		Middle Name	Last Name
ASHISH RAVINDRA			MEWAL
Son/ wife/ daughter of : RAVINDRA		MEWAL	
Identification mark :			
Gender (Tick ✓)	Male <input checked="" type="checkbox"/> Female <input type="checkbox"/> Transgender <input type="checkbox"/>	Date of Birth: (dd/mm/yyyy)	29-06-2000
Educational Qualification	10+2 or Equivalent	Blood Group	O+
Email (optional)		Mobile number	XXXXXX5713
Landline Number (optional)			

**3. Name of(Tick ✓)** Father ☒ Mother ☐ Husband ☐ Guardian ☐

First Name	Middle Name	Last Name
RAVINDRA		MEWAL

**4. Address (proof to be enclosed, in case of New Learner's Licence or New Driving Licence or Change of Address)**

	Present Address (shall be printed on Licence)	Permanent Address
House/Door/Flat No	ROW HOSE NO B7 GUT NO 13 PADEGAON	ROW HOUSE NO B7 GUT NO 13 PADEGAON
Street/Locality/Police Station	Aurangabad (M Corp.)	Aurangabad (M Corp.)
Location/Landmark	Chhatrapati Sambhajnagar,Chhatrapati Sam,MH	Chhatrapati Sambhajnagar,Chhatrapati Sam,MH
Village/Town	Aurangabad (M Corp.)	Aurangabad (M Corp.)
SubDist/Taluk/Mandal	Chhatrapati Sambhajnagar	Chhatrapati Sambhajnagar
District	Chhatrapati Sambhajnagar	Chhatrapati Sambhajnagar
State	Maharashtra	Maharashtra
Pin code	431001	431001

**5. In case of request for Addition of a Class of Vehicle in Transport Category, please fill the following:**

Driving School Name				
Enrollment number in the Driving School				
Enrollment date in the Driving School				
Certificate number issued by the Driving School				
Certificate date as issued by the Driving School				
Training period in the Driving School	From date		To date	

**6. Particulars of existing Licence (Learner's or Permanent)**

Licence Number				
Class of Vehicle(s)				
Name of the Licencing Authority which issued the Licence				
Validity Period	From date		To date	

**7. List of Documents attached (Please refer to the attached annexure and tick)****Self-Declaration as to Physical Fitness**

- (a) Do you suffer from epilepsy, or from sudden attacks of loss of consciousness or giddiness from any cause ? **No**
- (b) Are you able to distinguish with each eye ( or if you have held a driving licence to drive a motor vehicle for a period of not less than five years and if you have lost, the sight of one eye after the said period of five years and if the application is for driving a light motor vehicle other than a transport vehicle fitted with an outside mirror on the steering wheel side) or with one eye, at a distance of 25 metres in good day light (with glasses , if worn) a motor car number plate? **Yes**
- (c) Have you lost either hand or foot or are you suffering from any defect in movement, control or muscular power of either arm or leg ? **No**
- (d) Do you suffer from night blindness ? **No**
- (e) Are you so deaf as to be unable to hear ( and if the application is for driving a light motor vehicle, with or without hearing aid) the ordinary sound signal ? **No**
- (f) Do you suffer from any other disease or disability likely to cause your driving of a motor vehicle to be a source of danger to the public, if so, give details? **No**

**DECLARATION**

I am willing to donate my organ/tissue in case of death

**No**

I declare that the facts stated above and documents submitted are true and genuine to the best of my knowledge and belief. I also state that I have/ have not been disqualified from holding a Driving Licence.

Date: 08-02-2025

**Signature of the Applicant****DECLARATION under sub-section (2) of section 7 of the Motor Vehicles Act, 1988**

Shri/Smt./Kumari \_\_\_\_\_ Not Applicable \_\_\_\_\_ son/daughter of \_\_\_\_\_ Not Applicable

who is a minor is under my care and I accept responsibility for his/her driving. If at a later date I decide not to accept responsibility for his /her

I shall inform the licensing authority in writing for the cancellation of the licence. I give my consent for his / her obtaining the learner's licence.

Name of the parent / guardian: Not Applicable

Relationship with the applicant: Not Applicable

**Signature of the parent / guardian**

**FOR OFFICE USE ONLY**



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1. The applicant ASHISH RAVINDRA MEWAL is exempted from production of a medical certificate under Rule 6 of the Central Motor Vehicles Rules, 1989;  Learner's licence may be issued.	YES/NO
2. The applicant ASHISH RAVINDRA MEWAL is exempted from the Preliminary Test under sub-rule (2) of Rule 11 of the Central Motor Vehicles Rules, 1989;  Learner's licence may be issued.	YES/NO

3. Preliminary Test to check adequate knowledge and understanding of the matters namely traffic signs, traffic signals, duties of driver in case of his vehicle being involved in an accident, or documents to be carried while driving etc,. Subrule (1) of Rule 11 of the Central Motor Vehicles Rules, 1989 <b>(Name:ASHISH RAVINDRA MEWAL)</b>	Date of Test	Result (✓ )	Testing Authority
		Pass / Fail / Absent/ Exempted	
Driving Test (Rule 15 of the Central Motor Vehicles Rules, 1989)	Date of Test	Result Pass / Fail	

The Learner's licence / Driving Licence is

Issued ☐

Refused ☐

Signature of licensing authority (or other person authorised in this behalf)

**LIST OF DOCUMENTS TO BE SUBMITTED OR UPLOADED BY THE APPLICANT**

Proof of Address and Age. (Select only one if the proof is common for Address and Age)

1. Aadhar Card ☐
2. Electoral Roll ☐
3. Life Insurance Policy ☐
4. Passport ☐
5. School Certificate ☐
6. Birth Certificate ☐
7. Pay slip issued by any office of the State Government or Central Government or a local Body ☐
8. Affidavit sworn before an Executive Magistrate or Notary Public or First Class Judicial Magistrate ☐
9. A certificate granted by a Registered Medical Practitioner not below the rank of Civil Surgeon as to the age of the applicant ☐
10. Any other document or documents as may be specified by State Government ☐

**Other documents to be enclosed or uploaded if applicable**

1. Self Declaration for Physical Fitness in Form – 1 ☐
2. Medical Certificate in Form- 1A (to be provided if the applicant is applying for renewal and is above 40 years of age or applying for Transport Licence) ☐
3. Driving Certificate issued by Driving School or Establishments in Form 5 ☐
4. Parent or Guardian Declaration in case of applicant who is a minor ☐
5. Photograph ☐
6. Valid proof of passport and visa (for International Driving Permit only) ☐
7. Proof of legal presence in India in addition to proof of residence in case of Foreigners ☐
8. Other documents, if any ☐
9. The copy of police complaint made (in case the Driving Licence was lost or mutilated or defaced or damaged, lost). ☐
10. For change of name -
  - (a) Existing name \_\_\_\_\_
  - (b) Name to be changed as \_\_\_\_\_
  - (c) Documents enclosed:-
    - (i) Affidavit sworn before a First Class Judicial Magistrate or a Notary Public ☐
    - (ii) Marriage certificate ☐
    - (iii) Copy of newspaper advertisement ☐