# TELANGANA TRANSPORT DEPARTMENT Confirmed Booking Slip for Driving License Test.

## **Electronic Slot Booking Slip**

### Dear Mr KULLAI REDDY YALETI,

Thanks for using Online Driving Licence slot booking service.

Your Learning Licence Number is **LLRTS009354222019** 

Your Driving Licence Test slot has been confirmed on **06-01-2020** between **11:00 AM -- 12:00 PM**.

Please report at **KONDA PUR TEST CENTRE** for driving test at **10:00 AM** , failing which your slot will be cancelled.

For the following class of vehicle(s):

1. MCWG -: KONDAPUR TRACK-1

Payment made			TEST CENTRE A DDRESS
<ol> <li>Application Fee</li> <li>Test Fee</li> <li>Smart Card Fee</li> <li>Service Charge</li> <li>Postal Charge</li> <li>Late Fee</li> </ol>	Rs. Rs. Rs. Rs. Rs.	200 300 200 300 35 0	Driving Test Track, Beside Bikshapathi Nagar, Sherilingampalli (mandal), Rangareddy District - 500084
Total	Rs.	1035	

Your payment is recieved vide Transaction No: 49NETR001161665

#### Important :-

- 1. Please bring this booking slip, your Original Learning License and all printed forms for verification.
- 2. You will not be permitted for the test without printed forms.
- 3. Please note this booking is subject to a working day only. Where a holiday is declared by Government, kindly check the web site <a href="https://www.transport.telangana.gov.in">www.transport.telangana.gov.in</a> for any changes. All changes will be notified on website only.

# Please bring your vehicle along with following valid documents of your vehicle.

- 1. Registration Certificate.
- 2. Insurance Certificate.
- 3. Pollution Under Control Certificate.
- 4. Tax, Permit and Fitness Certificate in case of Transport vehicles.

Licencing Authority,

KONDAPUR TEST CENTRE



# FORM - 4 (See Rule 14(1)) FORM OF APPLICATION FOR LICENCE TO DRIVE A MOTOR VEHICLE



To The Licensing Authority, RTA-HYDERABAD-CZ

I apply for a licence to enable to drive vehicles of the following description:-

### Motor cycle with gear

# PARTICULARS TO BE FURNISHED BY APPLICANT

1.	Full Name	KULLAI REDDY, YALET	Ī
2.	Son/Wife/Daughter of	YALETI ADI REDDY	
3.	Permanent Address (Proof to be enclosed) (Electoral Roll/Life Insurance/ Policy/ Passport/ Pay slip issued by any office of the Central Government/State Government or a local body/ Any other document or documents as may be prescribed by the State Government)	H.No Village/Locality	2/70 KONDURU
		Mandal	OTHER
		Town/City	ANANTAPUR
		Dist	OTHER
		State	Andhra Pradesh
		PIN	515405
4.	Termporary/Official Address (if any)	H.No	FLOOR NUM 3
		Office	
		Locality	NETAJI SUBHASH CHANDRS
		Post	Peddavadagur
		City	HYDERABAD
		PIN	500045
5.	Duration of stay at the present address		
6.	Date of Birth (DD/MM/YYYY) (Birth certificate/school certificate/any document or documents as may be prescribed by the State Government)	05/04/1991	
7.	Place Of Birth	Village/Town/City:	KONDURU
		Mandal/Zone:	OTHER
		District:	OTHER
		State:	Andhra Pradesh
8.	If place of birth outside India, when migrated to India		
9.	Educational Qualification		
10.	Identification Mark(s)	1. A BLACK MOLE ON THE RIGHT SIDE OF THE CHEEK 2.	

11.	Blood Group				
12.	Have you previously held driving licence , if so, give details	License No: Original Issued by: Last renewed by: Valid upto:	RTA-HYDERABAD-CZ EKKEVASU 25/02/2020		
13.	Particulars and date of every conviction which has been ordered to be endorsed on any licence held by the applicant				
14.	Have you been disqualified for obtaining a licence to drive? If so, for what reasons				
15.	Have you been subject 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.	Date Of Test: Testing Authority: Result of Test:	26/08/2019 RTA-HYDERABAD-CZ PASS		
16.	I enclose three copies of my recent passport size photograph ( where laminated card is used no photographs are required )				
17.	I enclose the learner's licence Nodated				
18.	I enclose the driving licence NodatedIssued by				
19.	I have submitted along with my application for learner's licence the written consent of parent/guardian.				
20.	I have submitted along with the application for learner's licence / I enclose the medical fitness certificate.				
21.	I am exempted from medical test under rule 6 of the Central Motor Vehicles Rules, 1989				
22.	I am exempted from preliminary test under rule 11(2) of the Central Motor Vehicles Rules, 1989				
	I have paid the fee of Rs				

H2008

Date: 8/26/2019 1:08:03 PM

Signature or thumb impression of the applicant

Specimen signatures or thumb impression of the applicant

1)	2)

### **CERTIFICATE OF TEST OF COMPETENCE TO DRIVE**

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

Date: Signature of Testing Authority

Full Name: Designation:

Note: The application along with the scanned copies of the required documents may also be sent to the concerned Licensing authority through Electronic Mail, if allowed by the concerned State Government/Union Territory Administration.

In such cases, the Licensing Authority shall scrutinize the application and intimate the applicant about the acceptance/any discrepancy.

In case the application is accepted, the applicant shall be intimated through Electronic Mail to report to the authority concerned on an appointed date along with the documents for further verification, submission of application fee and examination of the applicant.

<sup>\*</sup> Strikeout whichever is inapplicable