


REPUBLIC OF THE PHILIPPINES
 DEPARTMENT OF TRANSPORTATION
 LAND TRANSPORTATION OFFICE
NON-PROFESSIONAL DRIVER'S LICENSE


 Last Name, First Name, Middle Name:
FALTADO, MYLENE SIOCSON
 Nationality: PHL Sex: F Date of Birth: 1991/08/09 Weight (kg): 83 Height(m): 1.65
 Address:
 B274 L7 GROUP 4 ZONE 13 AGUILA ST. PEMBO
 MAKATI CITY
 License No.: N26-21-000903 Expiration Date: 2025/08/09 Agency Code: N26
 Blood Type: B+ Eyes Color: BLACK
 Restrictions: 1,2 Conditions: NONE
 Signature of Licensee: 
 EDGAR C. GALVANTE
 Assistant Secretary

RESTRICTIONS:
 1. MOTORCYCLES/MOTORIZED TRICYCLES
 2. VEHICLE UP TO 4500 KGS G.V.W.
 3. VEHICLE ABOVE 4500 KGS G.V.W.
 4. AUTOMATIC CLUTCH UP TO 4500 G.V.W.
 5. AUTOMATIC CLUTCH ABOVE 4500 G.V.W.
 6. ARTICULATED VEHICLE 1600 KGS G.V.W. AND BELOW
 7. ARTICULATED VEHICLE 1601 UP TO 4500 G.V.W.
 8. ARTICULATED VEHICLE 4501 & ABOVE G.V.W.

CONDITIONS:
 A. WEAR EYEGLASSES
 B. DRIVE ONLY W/SPECIAL EQPT FOR UPPER LIMBS
 C. DRIVE ONLY W/SPECIAL EQPT FOR LOWER LIMBS
 D. DAYLIGHT DRIVING ONLY
 E. ACCOMPANIED BY A PERSON W/NORMAL HEARING

Serial Number:
168775898

I WILL NOT DONATE ANY ORGAN
 IN CASE OF EMERGENCY NOTIFY:
 NAME: REMIGIO FALTADO
 ADDRESS: MAKATI CITY
 TEL. NO.: 09934787295





ITO-DRIVER'S LICENSE-ITO-DRIVER'S LICENSE-1


REPUBLIC OF THE PHILIPPINES
 Unified Multi-Purpose ID
 CRN - 0111-0476253-1

SURNAME: FALTADO
 GIVEN NAME: MYLENE
 MIDDLE NAME: SIOCSON
 SEX: FEMALE
 DATE OF BIRTH: 1991/08/09
 ADDRESS:
 BLK 274 LOT 7 TARGET RANGE ST
 BRGY PEMBO MAKATI CITY NCR PHL
 1218




C177.3.189

In case of loss, please return to the nearest SSS Branch


**HOME DEVELOPMENT
MUTUAL FUND**
HDMF Transaction Card

FALTADO, MYLENE SIOCSON
 Pag-IBIG MID No. 1211-4210-2894
 Date of Birth August 09, 1991
 Security Code 544450
 Issue Date: 04-13-2015




PhilHealth
 Your Partner in Health

01-051112180-4
 PhilHealth Number
FALTADO, MYLENE SIOCSON
 Name

 Signature

