FORM 2

To,





Appl No:3566777820 Dt:01-12-2020

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

The Licencing Authority ASST.RTO,BUDGAM	
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 Without Gear (MCWOG)	
Motor Cycle With Gear (MCWG)	✓
Light Motor Vehicle as Non Transport (LMV NTV)	
Adapted Vehicle (vehicles for use by Divyang)	
Medium or Heavy Goods or Passenger Vehicle as Transport Vehicle	
E-Rickshaw	
E-Cart	
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, Thro	ee Wheeled vehicles for

personal use, Motor Car for personal use, Fork Lift;

road-roller the unladen weight of any of which, does not exceed 7,500 kilograms;

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

Transport vehicle includes a public service vehicle, a goods carriage, an educational institution bus or private service vehicle;

- 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.



Details of Aadhar car applicant.	d, if already availabl	y available with the Aadhar Card number Not Furnished						
Details of Aadhar app	olication number if ap	oplied.	Aadhar Card application number					
	First Name		M	liddle Name	Last Name			
	MUDASIR		AHMAD PANDITH			PANDITH		
Gender (Tick)	Male 🗹 Fem	ale T	ransgender	ansgender Date of Birth: (dd/mm/yyyy)		01-09-2002		
Educational Qualification	10+	2 or Equivale	nt	Blood Group		Unknown		
Email (optional)				Mobile number	XXXXXX7629			
Landline Number (op	tional)							
3. Name of(Tick	Father <		Mothe	Husba	an _	Guardia		
	First Name		Mi	ddle Name	Last Name			
	GH		QADIR			PANDITH		
4. Address (proof to b	pe enclosed, in case	of New Learne	r's Licence or Ne	w Driving Licence or Char	nge of A	Address)		
		Present Address (shall be printed on Licence)			Permanent Address			
House/Door/Flat No								
Street/Locality/Police Station			MAGAM			MAGAM		
Location/Landmark			Beerwah,Badgam,JK			Beerwah,Badgam,JK		
Village/Town			Kanda Hama			Kanda Hama		
SubDist/Taluk/Mandal		Beerwah			Beerwah			
District			Badgam			Badgam		
State			Jammu and Kashmir			Jammu and Kashmir		
Pin code		193411			193411			



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

Yes/No (d) Do you suffer from night blindness? (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 Yes/No hearing aid) the ordinary sound signal? (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 Yes/No to the public, if so, give details? DECLARATION I am willing to donate my organ/tissue in case of death Yes	o. In case of request for readment of a class of	0111010	iii iiaiiopi	ort Out	ogory, prodoc im an	o . o o			
Certificate number issued by the Driving School Certificate date as issued by the Driving School Training period in the Driving School From date 6. Particulars of existing Licence (Learner's or Permanent) Licence Number Class of Vehicle(s) MCWG , LMV ASST.RTO,BUDGAM The Licence Number 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 gliddiness from any cause? Yes/No (b) Are you able to distinguish with each eye (or if you have held a driving) alight 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, it worn) a motor car number plate? (c) Have you to stetler hand or foot or are you suffering from any defect in movement, control or muscular power of either arm or leg? (d) Do you suffer from might blindness? (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? 1) (1) Do you suffer from might blindness? (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? 1) (1) Do you suffer from might blindness? (e) Are you so deaf as to be unable to hear (and if the application is for driving of a motor vehicle, with or without hearing aid) the ordinary sound signal? 1) (1) 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? Yes/No DECLARATION 1 am willing to donate my organitissue in case of death Yes DECLARATION 2 Signature of the Applicant Declaration and other sub-section (2) of section 7 of the Motor Vehicles Act, 1988	Driving School Name								
Certificate number issued by the Driving School Certificate date as issued by the Driving School Training period in the Driving School From date 6. Particulars of existing Licence (Learner's or Permanent) Licence Number JK04 /0004097/2020 Class of Vehicle(s) Name of the Licencing Authority which issued the Licence Validity Period From date O5-10-2020 To date 04-04-2021 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? Yes/No 10) 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 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 at distance of 25 meters in good deylight (with glasses, if worn) a motor can rumber plate? (b) Are you so deaf as to be unable to hear (and if the application is for driving a light motor vehicle to the armound and the plate of the plate o	Enrollment number in the Driving School								
Certificate date as issued by the Driving School From date From date From date To date To date 6. Particulars of existing Licence (Learner's or Permanent) Licence Number JK04 /0004007/2020 Class of Vehicle(s) Name of the Licencing Authority which issued the Licence Name of the Licencing Authority which issued the Licence Validity Period From date O5-10-2020 To date 04-04-2021 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 gliddiness from any cause? Yes/No 10) 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 tool less than five years and if you have lost, the signify 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) dissess, if worn) a motor car number plate? (c) Have you lost either hand or foot or are you suffering from any defect in movement, control or muscular power of either washing only the ordinary sound signal? (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 yes/No to be public, if so, give details? DECLARATION Lam willing to donate my organitissue in case of death Yes Leader that the facts stated above and documents submitted are true and genuine to the best of my knowledge and belief. I also state that have/ have notbeen disqualified from holding a Driving Licence.	Enrollment date in the Driving School								
Training period in the Driving School From date 6. Particulars of existing Licence (Learner's or Permanent) Licence Number JKQ4 /0004007/2020 Class of Vehicle(s) Name of the Licencing Authority which issued the Licence (Learner's or Permanent) Validity Period From date O5-10-2020 To date 04-04-2021 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? Yes/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 proof or driving a light motor vehicle of the orth an 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? (c) Have you lost either hand or foot or are you suffering from any defect in movement, control or muscular power of either with one of the public, if so, give details? (d) Do you suffer from night blindness? (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 Yes/No to the public, if so, give details? DECLARATION I am willing to donate my organ/tissue in case of death Yes DECLARATION DECLARATION Lam willing to donate my organ/tissue in case of death Yes DECLARATION DECLARATION Signature of the Applicant Declaration winder sub-section (2) of section 7 of the Motor Vehicles Act, 1988	Certificate number issued by the Driving School	ıl							
6. Particulars of existing Licence (Learner's or Permanent) Licence Number JK04 /0004007/2020 Class of Vehicle(s) MCWG , LMV Name of the Licencing Authority which issued the Licence Validity Period From date O5-10-2020 To date 04-04-2021 7. List of Documents attached (Please refer to the attached annexure and tick) Self-Declaration as to Physical Fitness (a) Do you sulfer from epilepsy, or from sudden attacks of loss of consciousness or giddiness from any cause? Yes/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? (c) Have you lost either hand or foot or are you suffering from any defect in movement, control or muscular power of either with or eye, and a distance of 25 metres in good day light (with glasses , if worn) a motor car number plate? (d) Do you suffer from night blindness? (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 Yes/No hearing aid) the ordinary sound signal? (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 Yes/No to the public, if so, give details? DECLARATION DecLARATION Date: 01-12-2020 Signature of the Applicant Date: 01-12-2020 Signature of the Applicant	Certificate date as issued by the Driving Schoo	I							
Class of Vehicle(s) MCWG , LMV Name of the Licencing Authority which issued the Licence Validity Period From date O5-10-2020 To date 04-04-2021 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? Yes/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 sidely or with one eye, at a distance of 25 metres in good day light (with glasses, if worn) a motor car number plate? (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? (d) Do you suffer from night blindness? (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 Yes/No hearing aid) the ordinary sound signal? (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 Yes/No hearing aid) the ordinary sound signal? I am willing to donate my organ/tissue in case of death Yes DECLARATION Date: 01-12-2020 Signature of the Applicant DECLARATION under sub-section (2) of section 7 of the Motor Vehicles Act, 1988	Training period in the Driving School		From da	ite		To da	ite		
Name of the Licencing Authority which issued the Licence Prior date Promote Structure and tick Promote Structure and tick Promote Structure and tick Promote Structure and tick Self-Declaration as to Physical Fitness (a) Do you suffer from epilepsy, or from sudden attacks of loss of consciousness or gliddiness from any cause? Yes/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 wheels disdle) or with one eye, at a distance of 25 metres in good day light (with glasses, if worn) a motor car number plate? (c) Have you lost either hand or foot or are you suffering from any defect in movement, control or muscular power of either part or leg? (d) Do you suffer from night blindness? (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 Pes/No hearing alid) the ordinary sound signal? (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 of the public, if so, give details? DECLARATION I am willing to donate my organ/tissue in case of death 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 have/ have notbeen disqualified from holding a Driving Licence.	6. Particulars of existing Licence (Learner's or I	Perman	ent)						
Name of the Licencing Authority which issued the Licence Validity Period From date O5-10-2020 To date O4-04-2021 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 giddness from any cause? Yes/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 (whit) glasses, if worn) a motor car number plate? (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? (d) Do you suffer from night blindness? (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? (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 Yes/No to the public, if so, give details? DECLARATION I am willing to donate my organ/tissue in case of death Yes 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 have/ have notbeen disqualified from holding a Driving Licence.	Licence Number	JK	04 /0004	007/2	020				
To date	Class of Vehicle(s)	MCW	G , LMV						
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? Yes/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? (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? (d) Do you suffer from night blindness? (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 Yes/No hearing aid) the ordinary sound signal? (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 Yes/No to the public, if so, give details? DECLARATION I am willing to donate my organ/tissue in case of death Yes 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 have/ have notbeen disqualified from holding a Driving Licence. DECLARATION DECLARATION Signature of the Applicant DECLARATION under sub-section (2) of section 7 of the Motor Vehicles Act, 1988		ASS	ST.RTO,E	BUDG	AM				
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? Yes/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? (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? (d) Do you suffer from night blindness? (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? (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? DECLARATION I am willing to donate my organ/tissue in case of death Yes 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 have/ have notbeen disqualified from holding a Driving Licence. Date: 01-12-2020 Signature of the Applicant DECLARATION Under sub-section (2) of section 7 of the Motor Vehicles Act, 1988	Validity Period	From	date	05-1	0-2020	To date	04-0	04-2021	
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? Yes/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? (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? (d) Do you suffer from night blindness? (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? (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? DECLARATION I am willing to donate my organ/tissue in case of death Yes 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 have/ have notbeen disqualified from holding a Driving Licence. Date: 01-12-2020 Signature of the Applicant DECLARATION Under sub-section (2) of section 7 of the Motor Vehicles Act, 1988									
Yes/No (d) Do you suffer from night blindness? (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 Yes/No hearing aid) the ordinary sound signal? (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 Yes/No to the public, if so, give details? DECLARATION I am willing to donate my organ/tissue in case of death Yes 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 have/ have notbeen disqualified from holding a Driving Licence. Date: 01-12-2020 Signature of the Applicant DECLARATION under sub-section (2) of section 7 of the Motor Vehicles Act, 1988	Self- (a) Do you suffer from epilepsy, or from sudden a (b) Are you able to distinguish with each eye (or not less than five years and if you have lost, the sfor driving a light motor vehicle other than a trans with one eye, at a distance of 25 metres in good	ttacks of the sight of port very day light	aration of loss of comments ave held a one eye a chicle fitte ont (with glass)	as to conscious driving the driving driving asses,	co Physical Figure 2 pushess or giddiness or	motor vehicle years and if the n the steering or number plate	for a perione application wheel side	ion is e) or	Yes/No
(d) Do you suffer from night blindness? (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 Yes/No hearing aid) the ordinary sound signal? (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 Yes/No to the public, if so, give details? DECLARATION I am willing to donate my organ/tissue in case of death Yes 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 have/ have notbeen disqualified from holding a Driving Licence. Date: 01-12-2020 Signature of the Applicant DECLARATION under sub-section (2) of section 7 of the Motor Vehicles Act, 1988	arm or leg?			40.001	,	o. oaooa.a.	. роло. о.	o.uo.	
hearing aid) the ordinary sound signal? (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 Yes/No to the public, if so, give details? DECLARATION I am willing to donate my organ/tissue in case of death Yes 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 have/ have notbeen disqualified from holding a Driving Licence. Date: 01-12-2020 Signature of the Applicant DECLARATION under sub-section (2) of section 7 of the Motor Vehicles Act, 1988	(d) Do you suffer from night blindness?								165/110
DECLARATION I am willing to donate my organ/tissue in case of death 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 have/ have notbeen disqualified from holding a Driving Licence. Date: 01-12-2020 Signature of the Applicant DECLARATION under sub-section (2) of section 7 of the Motor Vehicles Act, 1988	(e) Are you so deaf as to be unable to hear (and hearing aid) the ordinary sound signal ?	if the a	pplication	is for o	driving a light motor	vehicle, with o	or without		Yes/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 have/ have notbeen disqualified from holding a Driving Licence. Date: 01-12-2020 Signature of the Applicant DECLARATION under sub-section (2) of section 7 of the Motor Vehicles Act, 1988	(f) Do you suffer from any other disease or disabito the public, if so, give details?	lity likel	•	•	•	ehicle to be a	source of d	danger	Yes/No
Date: 01-12-2020 Signature of the Applicant DECLARATION under sub-section (2) of section 7 of the Motor Vehicles Act, 1988	I declare that the facts stated above and docum	nents su	ubmitted a	re true	and genuine to the	e best of my kn		nd belief.	I also state that
DECLARATION under sub-section (2) of section 7 of the Motor Vehicles Act, 1988					U	Nudai	gor	110	
						•	f the Applic	cant	
Shri/Smt./Kumarison/daughter of Not Applicable	<u></u>			of the	Motor Vehicles	s Act, 1988			
	Shri/Smt./Kumari Not Ap	plicable)		son	/daughter of	Not	t Applicab	le
	I shall inform the licensing authority in writing for	or the ca	ancellation	of the	licence.I give my c	onsent for his	/ her obtaii	ning the	

Name of the parent / guardian: Not Applicable
Relationship with the applicant: Not Applicable

Signature of the parent / guardian

FOR OFFICE USE ONLY



Appl No:3566777820 Dt:01-12-2020

1.	The applicant MUDASIR AHMAD PANDITH is exempted certificate under Rule 6 of the Central Motor Vehicles Rulearner's licence may be issued.		YES/NO		
2.	The applicant MUDASIR AHMAD PANDITH is exempted rule (2) of Rule 11 of the Central Motor Vehicles Rules,	YES/NO			
	Learner's licence may be issued.				
		.			
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	Date of Test	Result (✓) Pass / Fail / Absent/ Exempted		Testing Authority
	involved in an accident, or documents to be carried while driving etc,. Subrule (1) of Rule 11 of the Central Motor (Name:MUDASIR AHMAD PANDITH)				
	Driving Test (Rule 15 of the Central Motor Vehicles Rules, 1989)	Date of Test	Result Pass / Fail		
Th	e 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	Ш
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	
Otl	her 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 andvisa (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	